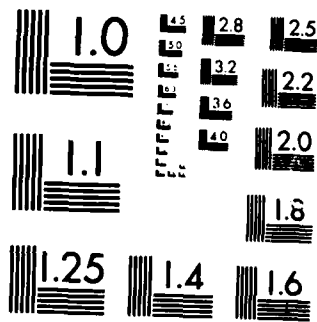


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UNITED STATES AIR FORCE

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OCCUPATIONAL SURVEY REPORT

DIET THERAPY CAREER LADDER

AFSC 926X0

AFPT 90-622-486
DECEMBER 1985

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OCCUPATIONAL ANALYSIS PROGRAM
USAF OCCUPATIONAL MEASUREMENT CENTER
AIR TRAINING COMMAND
RANDOLPH AFB, TEXAS 78150-5000

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HQ MAC/TTGT	1		1	
HQ PACAF/TTGT	1		1	
HQ PACAF/DPAT	3		3	
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USAFOMC, DET 4 (SHEPPARD AFB TX)	1		1	1
USAFOMC, DET 5 (LOWRY AFB CO)	1		1	1
USAFOMC/OMYXL	10	2m	5	10
3400 TCHTW/TTGX (LOWRY AFB CO)	5	2	9	2
3507 ACS/DPKI	1			

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PREFACE

This report presents the results of a detailed Air Force occupational survey of the Diet Therapy (AFSC 926X0) career ladder. Authority for conducting occupational surveys is contained in AFR 35-2. Computer products used in analysis for this report are available for use by operations and training officials.

The survey instrument for this project was developed by First Lieutenant William A. Carney, Inventory Development Specialist. Ms Becky Hernandez provided computer support for the project. First Lieutenant Jarean L. Carson, Occupational Analyst, analyzed the data and wrote the report. Administrative support was provided by Ms Iva L. Winslow. This report has been reviewed by Lieutenant Colonel Charles D. Gorman, Chief, Airman Career Ladders Analysis Branch, USAF Occupational Measurement Center, Randolph AFB, Texas 78150-5000.

Copies of this report are distributed to Air Staff sections, major commands, and other interested training and management personnel (see distribution on page i). Additional copies are available upon request to the USAF Occupational Measurement Center, attention: Chief, Occupational Analysis Division (OMY), Randolph AFB, Texas.

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SUMMARY OF RESULTS

1. SURVEY COVERAGE: The Diet Therapy career ladder was surveyed to help identify training considerations due to the change from AFSC 622X1 to AFSC 926X0, a biomedical specialty. Results are based on responses from 499 members (76 percent of all assigned 926X0 personnel).

2. SPECIALTY JOBS: Six clusters and three independent job types were identified in the analysis. The Medical Food Service Cluster contained 51 percent of the sample; much of their job involved preparing and serving food and cleaning and maintaining medical food service facilities. Other job groups were much smaller and more specialized, such as the Clinical Dietitians, who perform more direct application of diet therapy and clinical nutrition.

3. CAREER LADDER PROGRESSION: The 3- and 5-skill level jobs consisted of the more technical duties of the career ladder, with little or no supervision or management. There was a clear shift in the responsibilities of 7-skill level personnel, who perform supervisory, administrative, and training functions.

4. AFR 39-1 SPECIALTY DESCRIPTIONS: The description for the 3- and 5-skill level jobs accurately portrays the responsibilities of the apprentice and specialist levels. The 7-skill level description is accurate, but does not reflect the superintendent responsibilities of some 7-skill level personnel.

5. TRAINING ANALYSIS: Both the STS and POI should be reviewed for possible adjustments. Some items in the STS are not supported by survey data, and several tasks related to cleaning and maintaining facilities may need to be added. The POI for the Diet Therapy course may contain a few items more appropriate for OJT, but may need a few tasks added as well.

6. IMPLICATIONS: The career ladder does not seem to have changed substantially since becoming a biomedical career ladder. The low job satisfaction related to the routine nature of many jobs, however, may indicate the desire for a shift to greater involvement in application of diet therapy and clinical nutrition.

Key words: diet therapy, biomedical career ladder, job satisfaction, routine nature of many jobs, desire for greater involvement in application of diet therapy and clinical nutrition.



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OCCUPATIONAL SURVEY REPORT
DIET THERAPY CAREER LADDER
(AFS 926X0)

INTRODUCTION

This occupational survey examines the Diet Therapy career ladder, including AFSCs 92630, 92650, 92670, and 92690. A change to AFR 39-1 on 31 October 1983 called for AFSC 622X1 to become AFSC 926X0, a biomedical career ladder. The study was requested by the School of Health Care Sciences at Sheppard AFB, Texas, for the purpose of identifying any training concerns due to this change. The school also wanted information about the specific types of diets for which menus are prepared in this career ladder, as well as a more accurate and comprehensive list of tasks performed. In addition, this report also provides information concerning personnel utilization, job structure, and impact on classification. A previous report on the 622X1 specialty was published in March 1978.

From 1 July 1968 until the change to AFR 39-1, which took effect on 31 October 1983, the Diet Therapy career ladder was designated AFSC 622X1. The change redesignated the Diet Therapy specialty as AFSC 926X0, taking it from the Food Services career field and making it a biomedical career ladder. The major responsibilities of this AFSC, according to AFR 39-1, include preparing, cooking, and serving routine and therapeutic diets for personnel under medical treatment; performing clinical dietetics tasks; and performing control and administrative duties in medical food service facilities. In addition, 7- and 9-skill level personnel supervise and superintend medical food service activities.

To qualify for AFSC 926X0, personnel must first complete a preparatory training course (G3ABR62230/G3AQR92630) which covers preparing, cooking, and serving food. This is an 8-week, 4-day course at Lowry Technical Training Center and is the same course given to Air Force Food Service Specialists in AFSC 622X0. After this course, personnel must complete a basic technical training course (J3ABR92630) at the School of Health Care Sciences at Sheppard AFB, Texas. This 4-week course covers calculating, modifying, preparing, and serving regular and therapeutic diets; operating and cleaning medical food service equipment; procuring, storing, and issuing dietetic foods and supplies; and performing medical food service administration.

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SURVEY METHODOLOGY

Inventory Development

USAF Job Inventory AFPT 90-622-486, dated May 1984, was used to collect the data for this survey. A preliminary task list was prepared using the previous inventory, together with career ladder documents such as AFR 39-1 and the Specialty Training Standard (STS) for AFSC 926X0. The preparation of the current task list also included a complete review and update of the 1978 inventory with the help of four instructors at the School of Health Care Sciences at Sheppard AFB TX. The preliminary task list was refined and validated through personal interviews with 43 subject-matter specialists at 8 different bases, selected to cover a wide variety of Diet Therapy functions. In addition to the visit to the School of Health Care Sciences, the following bases were included in the inventory development process:

Andrews AFB MD--MAC representation; large Regional Hospital;
AEROVAC capabilities

Wilford Hall Medical Center TX--largest hospital in the Air
Force; greater specialization

Travis AFB CA--MAC representation; midsize hospital

Carswell AFB TX--SAC representation; large, well-experienced
shop using the Aladdin system

England AFB LA--small facility; some outpatient counseling

Bergstrom AFB TX--TAC representation

Davis-Monthan AFB AZ--TAC representation; long standing
involvement in outpatient counseling; base outreach
programs

The development process resulted in a final job inventory with 380 tasks, which were divided into 13 functional or duty areas. The inventory also contains a background section, including such items as grade, TAFMS, size of medical facility, diets with which personnel are experienced, and equipment used.

Survey Administration

The inventory was distributed to Consolidated Base Personnel Offices (CBPO) in operational units worldwide for distribution to 578 eligible job incumbents. These incumbents were selected from a computer-generated list obtained from the Air Force Human Resources Laboratory (AFHRL).

To complete the survey, each respondent first answered the background questions, then checked each task he or she performed. Finally, incumbents rated each task according to relative time spent performing that task. Ratings range from 1 (a very small amount of time spent) to 9 (a very large amount of time spent). As part of the computer analysis, all of the incumbent's ratings are combined and the total is assumed to represent 100 percent of time spent on the job; each task rating is then divided by this total and multiplied by 100 to give the relative percent time spent for each task. Using these figures, tasks can be compared in terms of relative percent time spent performing them.

Survey Sample

To ensure an accurate representation across major commands (MAJCOM) and paygrade groups, survey booklets were mailed to all eligible DAFSC 926X0 personnel (those in training, hospital, or PCS status were excluded). Table 1 reflects the percentage distribution, by MAJCOM, of personnel assigned to the career ladder as of June 1984 and of respondents in the survey sample. Tables 2 and 3 show sample distribution for paygrade and TAFMS groups. The 499 respondents in the final sample represent 76 percent of the total assigned DAFSC 926X0 personnel, and 86 percent of those eligible. As Tables 1 through 3 reflect, the survey sample provides a very good representation of the career ladder population.

TABLE 1
COMMAND DISTRIBUTION OF SURVEY SAMPLE

<u>COMMAND</u>	<u>PERCENT OF ASSIGNED</u>	<u>PERCENT OF SAMPLE</u>
SAC	25	27
TAC	18	17
ATC	15	16
MAC	10	11
USAFE	10	7
AFSC	7	7
PACAF	6	6
AFLC	4	3
AAC	3	3
OTHER	3	3

Total Assigned: 655
 *Total Eligible: 578
 Total in Sample: 499
 Percent Assigned to Sample: 76%
 Percent Eligible in Sample: 86%

* Excludes those in training, hospital, or PCS status

TABLE 2
PAYGRADE DISTRIBUTION OF SURVEY SAMPLE

<u>PAYGRADE</u>	<u>PERCENT OF ASSIGNED</u>	<u>PERCENT OF SAMPLE</u>
E-1 TO E-3	40	40
E-4	21	19
E-5	22	24
E-6	10	9
E-7	7	7
E-8 TO E-9	*	*

* Less than 1 percent

TABLE 3
TAFMS DISTRIBUTION OF SURVEY SAMPLE

<u>TAFMS (MOS)</u>	<u>PERCENT OF SAMPLE</u>	<u>PERCENT OF ASSIGNED</u>
1-48	50	45
49-96	21	24
97-144	9	11
145-192	11	10
193-240	6	8
241+	3	2

Task Factor Administration

Selected senior personnel in AFSC 926X0 completed a second booklet in addition to the job inventory booklet. Processed separately, these booklets provide rating information for each task concerning either task difficulty (TD) or training emphasis (TE). Task difficulty refers to the length of time required for the average job incumbent to learn to do the task. Training emphasis refers to the importance of structured training for first-enlistment personnel--that is, training provided through any organized training method, such as resident technical schools, field training detachments, mobile training teams, or formal OJT. Table 4 shows the distribution and representation of both the TD and TE samples, together with the percent of 7-skill level personnel assigned.

Task Difficulty. To complete the task difficulty booklet, each individual rated each task in the inventory with which they were familiar on a 9-point scale, ranging from extremely low relative difficulty (a rating of one) to extremely high relative difficulty (a rating of nine). Thirty-six NCOs provided the TD data with an interrater reliability (as assessed through components of variance of standardized group means) of .96. This figure indicates high agreement between raters. The TD ratings were adjusted to give a rating of 5.00 to a task of average difficulty, with a standard deviation of 1.00. The data are then used to rank order the tasks in the inventory by degree of difficulty.

Job Difficulty Index (JDI). TD is also used to compute a job difficulty index for job groups identified in the survey. To provide a relative measure of the complexity of the jobs in comparison to each other, the JDI is computed based on the number of tasks performed and the average difficulty per unit time spent. Thus, a group spending more time on difficult tasks and performing more tasks will have a higher JDI. After measurements are standardized, the index ranges from 1.0 for a very easy job to 25.0 for a very difficult job, with an average of 13.0.

Training Emphasis. Individuals completing training emphasis booklets rated tasks they believed required training for first-term personnel on a 10-point scale, ranging from a blank (no training emphasis) to 9 (extremely heavy training required). The TE ratings are then used to rank-order the inventory tasks from high to low training emphasis. TE data were collected from 42 experienced NCOs in AFSC 926X0 stationed worldwide. For TE ratings, the interrater reliability was .95, indicating high overall agreement between raters. The average TE rating was 3.75, with a standard deviation of 1.94.

When used in conjunction with other information, such as percent members performing, task difficulty and training emphasis ratings can provide insight into training requirements. Such insight may help validate lengthening or shortening portions of instruction supporting AFSC-needed knowledges or skills.

TABLE 4
COMMAND DISTRIBUTION OF TASK FACTOR RATERS

<u>COMMAND</u>	<u>PERCENT ASSIGNED</u>	<u>PERCENT TD RATERS</u>	<u>PERCENT TE RATERS</u>
SAC	23	25	26
ATC	19	14	10
TAC	18	25	17
MAC	9	14	10
USAFE	9	8	9
AFSC	8	3	5
PACAF	5	5	14
AAC	3	0	2
AFLC	3	3	5
AU	2	3	2
OTHER	2	0	0

SPECIALTY JOBS (Career Ladder Structure)

An important function of the USAF Occupational Analysis Program is to examine the structure of a career ladder. Based on incumbent responses to survey questions, the analysis identifies groups of incumbents spending similar amounts of time performing many similar tasks. A job type is a group of individuals who perform many of the same tasks and also spend similar amounts of time performing them. When there is a substantial degree of similarity between different job types, they are grouped together and labeled clusters. Often, there are cases of specialized job types too dissimilar to be grouped into any cluster; these unique groups are labeled independent job types. Analysis of the distinct jobs performed within the career ladder and their relationship to each other provide a baseline upon which other aspects of the career ladder can be evaluated. For example, this information can be used to understand current utilization of personnel, to identify job satisfaction trends that may impact management decisions, or to examine such career ladder documents as AFR 39-1 Specialty Descriptions, Specialty Training Standards, or basic course Plans of Instruction. Examining what jobs are performed in the career ladder and the percentages performing those jobs is also helpful in determining what training should be given to personnel in the specialty.

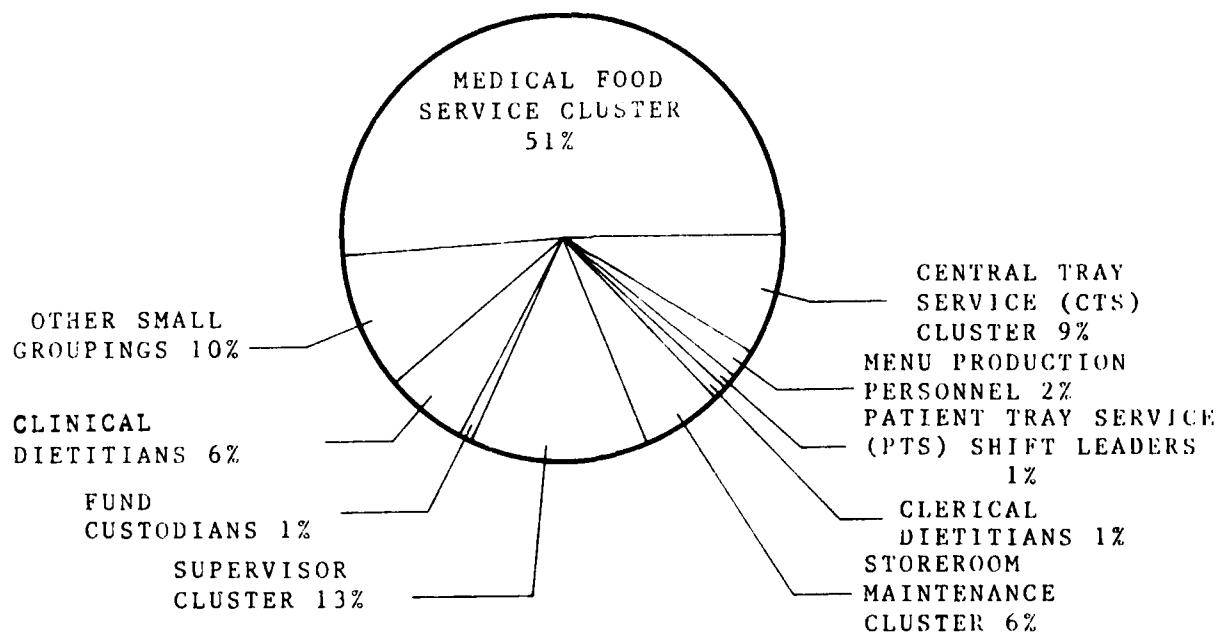
Specialty Structure Overview

In the Diet Therapy career ladder, analysis identified six clusters and three independent job types. The absence of substantial overlap among these jobs indicates a certain degree of specialization within the career ladder, as illustrated in Figure 1 and listed below. The group (GRP) number refers to computer-printed information; the number of personnel in the group is represented by the letter N.

- I. MEDICAL FOOD SERVICE CLUSTER (GRP72, N=254)
 - A. Medical Food Service Specialists (GRP79, N=205)
 - B. Medical Food Service NCOICs (GRP122, N=49)
- II. CENTRAL TRAY SERVICE (CTS) CLUSTER (GRP44, N=45)
 - A. Serving Line and Tray Preparation Personnel (GRP110, N=17)
 - B. Therapeutic Diet Tray Preparation Personnel (GRP84, N=14)
- III. MENU PRODUCTION PERSONNEL (GRP104, N=8)
- IV. PATIENT TRAY SERVICE (PTS) SHIFT LEADERS (GRP54, N=6)
- V. CLERICAL DIETITIANS (GRP64, N=5)

FIGURE 1

926X0 CAREER LADDER DISTRIBUTION
(PERCENT MEMBERS PERFORMING)



VI. STOREROOM MAINTENANCE CLUSTER (GRP50, N=32)

- A. NCOICs of Medical Subsistence Procurement (GRP90, N=10)
- B. Storeroom Clerks (GRP98, N=21)

VII. SUPERVISOR CLUSTER (GRP33, N=67)

- A. Medical Food Service Supervisors (GRP74, N=52)
- B. Training Supervisors (GRP71, N=5)
- C. Dietary Supervisors (GRP62, N=5)
- D. Diet Therapy Superintendents (GRP40, N=5)

VIII. FUND CUSTODIANS (GRP43, N=5)

IX. CLINICAL DIETITIANS (GRP10, N=28)

- A. Dietitian Clerks (GRP96, N=9)
- B. Nutrition Counselors (GRP63, N=10)

Ninety percent of the survey respondents were grouped into the above clusters and independent job types. The remaining 10 percent did not perform functions similar enough to be grouped as job types. These personnel described themselves using such titles as nutritional medicine personnel, and nourishment personnel. Also included in the remaining 10 percent were resident course personnel at Sheppard AFB. Although these personnel grouped together, the dissimilarity of tasks performed and time spent on those tasks prevented them from being identified as a job type or independent job type.

Group Descriptions

The following paragraphs briefly describe the clusters and independent job types identified in the analysis. Tables 5 and 6 provide selected background and job satisfaction data for these groups. Appendix A contains a summary of background information and more detailed listings of representative tasks for these groups.

I. MEDICAL FOOD SERVICE CLUSTER (GRP72). This cluster is the largest job group, with 254 members, over half of the total sample. Personnel in this cluster prepare food for both regular and therapeutic diets. They perform an average of 160 tasks, spending the largest single portion of their time (25 percent) on tasks related to menu production; that is, tasks involving food preparation, cooking, and menu orders. The next largest portion of their time (17 percent) is spent performing tasks related to cleaning and maintaining food service facilities. Examples of some tasks representative of this group's job include the following:

TABLE 5

SELECTED BACKGROUND INFORMATION FOR SPECIALTY JOB GROUPS

	MEDICAL FOOD SERVICE CLUSTER	CENTRAL TRAY SERVICE CLUSTER	MENU PRODUCTION PERSONNEL	PTS SHIFT LEADERS	CLERICAL DIETITIANS	STORE- ROOM MAINT CLUSTER	SUPVR CLUSTER	FUND CUSTODIANS	CLINICAL DIETITIANS
NUMBER IN GROUP	254	45	8	6	5	32	67	5	28
PERCENT OF SAMPLE	51%	9%	2%	1%	1%	6%	13%	1%	6%
AVERAGE NUMBER OF TASKS	160	66	77	96	48	61	102	57	26
JOB DIFFICULTY (JDI)	15.0	8.0	10.1	11.9	8.4	10.7	16.4	10.5	8.2
MAJCOM (PERCENT)									
SAC	24%	40%	38%	0	60%	16%	33%	0	18%
TAC	23%	9%	25%	0	0	28%	13%	0	0
MAC	13%	7%	0	0	0	9%	3%	0	18%
ATC	17%	16%	13%	83%	0	16%	10%	0	11%
USAFE	6%	13%	13%	0	0	9%	10%	60%	4%
AAC	4%	2%	0	0	0	3%	3%	0	0
AFLC	4%	4%	0	0	0	3%	3%	20%	0
PACAF	4%	4%	0	17%	40%	9%	10%	0	11%
AFSC	3%	0	0	0	0	3%	9%	20%	39%
USAF	2%	0	13%	0	0	0	2%	0	0
OTHER	2%	4%	0	0	0	3%	3%	0	0
DAFSC (PERCENT)									
92630	22%	47%	25%	0	100%	6%	0	0	43%
92650	63%	53%	63%	33%	0	78%	19%	80%	50%
92670	13%	0	13%	67%	0	16%	81%	20%	7%
92690	1%	0	0	0	0	0	0	0	0
AVERAGE GRADE									
AVERAGE T1CF (MOS)	E-4	E-3	E-4	E-6	E-3	E-4	E-6	E-5	E-3
AVERAGE TAFMS (MOS)	50	19	67	123	15	68	122	89	32
PERCENT FIRST ENLISTMENT	67	27	89	147	33	87	172	111	46
	49%	85%	25%	0	80%	28%	2%	0	75%

TABLE 6

JOB SATISFACTION INDICATORS BY SPECIALTY JOB GROUP
(PERCENT RESPONDING)

	MEDICAL FOOD SERVICE CLUSTER	CENTRAL TRAY SERVICE CLUSTER	MENU PRODUCTION PERSONNEL	PTS SHIFT LEADERS	CLERICAL DIETITIANS	STORE- ROOM MAINT CLUSTER	SUPVR CLUSTER	FUND CUSTODIANS	CLINICAL DIETITIANS
<u>EXPRESSED JOB INTEREST:</u>									
INTERESTING	52	(38)	(38)	(50)	(40)	75	84	80	61
SO-SO	28	31	38	17	40	16	10	20	32
DULL	19	31	25	33	20	6	5	0	7
<u>PERCEIVED USE OF TALENTS:</u>									
FAIRLY WELL TO PERFECTLY LITTLE OR NOT AT ALL	64 35	(49) 51	(25) 75	67 33	60 40	78 19	94 5	60 40	71 29
<u>PERCEIVED USE OF TRAINING:</u>									
FAIRLY WELL TO PERFECTLY LITTLE OR NOT AT ALL	80 19	67 33	(38) 63	83 17	(20) 80	75 22	97 2	80 20	71 29
<u>SENSE OF ACCOMPLISHMENT FROM JOB:</u>									
SATISFIED	55	(36)	(38)	(33)	80	78	75	80	54
NEUTRAL	12	20	25	0	20	13	9	20	25
DISSATISFIED	32	44	38	67	0	6	15	0	21
<u>REENLISTMENT INTENTIONS:</u>									
WILL/PROBABLY WILL REENLIST	66	56	75	83	80	88	75	100	61
WILL NOT/PROBABLY WILL NOT REENLIST	28	44	13	0	20	6	8	0	39
WILL RETIRE	6	0	13	17	0	6	16	0	0

- prepare food for regular hospital diets
- cover, date, and store leftover food items
- make coffee, tea, or cocoa
- cook eggs
- clear and clean work tables and areas
- prepare food for diabetic diets according to guidelines in AF Forms 2479 and 2480 (diabetic)

Most personnel in this cluster work in smaller- to medium-size hospitals. Of the major commands, the two largest users of this group are SAC (24 percent) and TAC (23 percent). Nearly half of the personnel (49 percent) are in their first enlistment, 28 percent in their second enlistment, and 23 percent in their third or subsequent enlistment.

This cluster contains two job types, or groups of individuals performing jobs which are nearly the same: Medical Food Service Specialists and Medical Food Service NCOICs. Of these groups, the specialists spend more time preparing food, while the NCOICs spend more time performing tasks involving supervision and contact with patients. The specialists are mostly 5-skill levels in their first or second enlistment, while the NCOICs are 5- and 7-skill levels in their second or subsequent enlistment.

II. CENTRAL TRAY SERVICE (CTS) CLUSTER (GRP44). The 45 members of this group (9 percent of the total sample) perform duties related to preparation and serving of patient trays or serving lines, averaging about 66 tasks. About 29 percent of their time is spent preparing serving lines and serving food, with 24 percent spent performing menu production and 23 percent cleaning and maintaining food service facilities. The following are examples of tasks performed by this group:

- load patient trays onto food carts
- clean floors or walls
- transport food carts to serving line or wards
- serve food on serving lines
- clean or store patient food carts

There are two job types within this cluster. The first, Serving Line and Tray Preparation Personnel, concentrates mainly on preparing regular trays and taking care of serving lines. The second, Therapeutic Diet Tray Preparation Personnel, concentrates more on preparing trays for special therapeutic diets.

The average grade of personnel in this cluster is E-3, with 47 percent qualified at the 3-skill level, and the remaining 53 percent qualified at the 5-skill level. As a group, they average less than 2 years in the career ladder. Eighty-five percent are in their first enlistment. The largest percentage of this group (40 percent) are in SAC.

III. MENU PRODUCTION PERSONNEL (GRP108). This independent job type contains eight members, about 2 percent of the sample. Personnel in this group perform a more specialized job, concentrating mainly on cooking and preparing basic foods. They spend 46 percent of their time performing menu production, averaging 77 tasks. Some representative tasks include the following:

- cook meat
- season or flavor foods
- prepare canned food
- clean food prior to cooking or serving
- clean kettles

Most members (five of the eight) are qualified at the 5-skill level. Only two are in their first enlistment. Of the eight, only two entered the career ladder following resident technical training; three were retained from another specialty and three entered the career ladder by another method.

IV. PATIENT TRAY SERVICE (PTS) SHIFT LEADERS (GRP56). The six members of this group (1 percent of the sample) specialize in supervisory duties related to patient tray service, although they also help with the preparation and service of trays and serving lines. About 35 percent of their total job time is spent performing tasks that are supervisory or administrative in nature, and they perform an average of 96 tasks. The following are examples of some of the tasks they perform in their jobs:

- supervise patient tray service
- rotate job assignments for training purposes
- replenish foods in serving lines
- prepare and maintain AF Forms 2577 (Medical Food Service Daily Work Assignment)
- inspect completed patient trays

Personnel in this group are currently assigned to large hospitals; five are located at Keesler AFB, and one is located at Clark AFB. Members of this group are more experienced than those in many of the other groups. Their average grade is E-6, with two qualified at the 5-skill level and four qualified at the 7-skill level. All are in their third or subsequent enlistment, averaging a little over 12 years TAFMS.

V. CLERICAL DIETITIANS (GRP64). This small group of five members (1 percent of the sample) performs a specialized job which concentrates on administrative tasks related to diet orders. They also perform some food and tray preparation tasks. They average 48 tasks, and all members perform the following tasks:

- collect or maintain AF Forms 1094 (Diet Order)
- record patient tray service and therapeutic diet workload data on AF Forms 2573 (Diet Census)
- make ward rounds or visits
- collect ward diet order changes and provide them to food production personnel
- verify food or beverage serving temperatures

All members of this group work in small facilities (with 35 beds or less). This group seems to be the least experienced in that all are qualified at the 3-skill level, averaging a little over a year in the career ladder. All but one, who retrained into the career ladder, are in their first enlistment.

VI. STOREROOM MAINTENANCE CLUSTER (GRP50). There are 32 members in this group, accounting for 6 percent of the sample. Their job involves maintaining the medical food service storerooms and performing related administrative functions. In fact, as a group, they spend an average of half their total job time performing tasks within this duty of maintaining storerooms. They average 61 tasks, with only 20 accounting for half their time, including the following examples:

- order food items from commissary
- rotate stock using first in-first out (FIFO) principles
- post AF Forms 287 (Subsistence Request)
- issue food items
- return excess subsistence to stock

There are two job types within this cluster. Members of the first job type, the smaller of the two, refer to themselves as NCOICs of Medical Subsistence Procurement. Their job is more supervisory in nature, with about 46 percent of their time spent on supervisory and administrative duties, and only 30 percent of their time spent maintaining storerooms. The second job type, Storeroom Clerks, differs mainly in the amount of time they spend actually maintaining storerooms; 60 percent of their job time is spent on this duty, with much less time than the NCOICs spent on supervisory duties.

For the entire cluster, including both job types, the average grade is E-4, with 78 percent qualified at the 5-skill level, 16 percent qualified at the 7-skill level, and 6 percent qualified at the 3-skill level. Only 28 are in their first enlistment. The largest percentage are in TAC (28 percent), followed by SAC and ATC (16 percent each).

VII. SUPERVISOR CLUSTER (GRP33). The 67 members of this group (13 percent of the sample) are some of the more senior of the career ladder, averaging about 15 years of military service. Their average grade is E-6, and 81 percent are qualified at the 7-skill level, with the remaining 19 percent qualified at the 5-skill level. Only 2 percent are in their first enlistment.

Seventy-six percent of their job time is spent performing tasks within supervisory and administrative duties. Examples of some of the tasks they perform in their job include the following:

- supervise diet therapy specialists (AFSC 92650)
- establish or develop operating instructions (OI), policy letters, or self-inspection task lists
- inspect facilities and equipment for sanitation
- conduct in-service training
- prepare airman performance reports (APR)

Although most members of the cluster perform general supervision over medical food service personnel, there are a few small groups within the cluster that perform a slightly different type of supervisory job. Thus, in addition to the first job type, Medical Food Service Supervisors, there are three other job types: Training Supervisors, who specialize in training subordinates; Dietary Supervisors, who spend more time applying diet therapy and clinical nutrition; and Diet Therapy Superintendents, who perform a higher level supervisory job.

VIII. FUND CUSTODIANS (GRP43). This small cluster of five members (1 percent of the sample) also performs a supervisory job. In addition to the supervision of personnel, however, they also perform cashier functions. The following are examples of some tasks they perform in this job:

- perform meal count duties (cashier duties)
- prepare AF Forms 2570 (Medical Food Service Cash and Forms Receipt)
- supervise patient tray service
- supervise Diet Therapy Specialists (AFSC 92650)
- complete AF Forms 1087 (Cash Meal Log)

Most personnel in this cluster (four of the five) are qualified at the 5-skill level. Their average grade is E-5, and all are in their second or subsequent enlistment.

IX. CLINICAL DIETITIANS (GRP10). This cluster is composed of 28 members (6 percent of the sample) who perform tasks related to clinical nutrition counseling of patients. On the the average, they spend 45 percent of their total job time applying diet therapy and clinical nutrition. They perform an average of only 26 tasks, including the following:

- adapt dietary allowances to patient's menu using AF Forms 1741 (Diet Record)
- write diets using dietary Kardex files
- make ward rounds or visits

plan calorie-restricted or diabetic diets using food exchange lists
interview patients to determine food habits or preferences

Within this cluster, there are two job types. Members of the first job type, Dietitian Clerks, perform a limited job (only six tasks take up half their total job time) which concentrates on administrative responsibilities. The second job type, Nutrition Counselors, is a more homogeneous group whose members interface with physicians or nurses and perform calculation of dietary requirements.

The cluster as a whole averages less than 4 years TAFMS, with 75 percent in their first enlistment. The average grade is E-3, with 43 percent qualified at the 3-skill level, 50 percent qualified at the 5-skill level, and only 7 percent qualified at the 7-skill level. Among the MAJCOMs, the largest percentage are in AFSC (39 percent), followed by SAC and MAC (18 percent each).

Comparison of Specialty Jobs

In addition to individual descriptions of the different jobs, it is helpful to compare them to each other to better understand the career ladder structure. The greatest percentage of personnel are in the Medical Food Service Cluster, which accounts for 51 percent of the sample. The next largest group, with only 13 percent of the sample, is the Supervisor Cluster, which is composed mainly of Medical Food Service Supervisors. Although other job groups may perform some of the same tasks as these groups, they perform more specialized jobs, such as storeroom maintenance or menu production.

Career ladder jobs were compared for difficulty using the Job Difficulty Index (JDI) described in the Task Factor Administration portion of this report. The JDI is based on the number of tasks performed and the relative difficulty of these tasks per unit time spent. The index ranges from 1.0 for very simple jobs to 25.0 for the most demanding. This index provides an overview of career ladder jobs and pinpoints jobs of increasing responsibility and broader scope. The group with the lowest JDI (8.0) is the Central Tray Service Cluster, although Clerical Dietitians and Clinical Dietitians had JDIs almost as low (8.4 and 8.2, respectively). As might be expected, the Supervisor Cluster is the group with the highest JDI (16.4); supervisors tend to perform more tasks, and the tasks they perform generally are the more difficult managerial-type tasks. See Table 5 for a complete list of JDI values for all job groups.

As shown in Table 6, job satisfaction indicators for many groups received low percentages of positive responses. The circled numbers in Table 6 identify especially low positive responses. Four groups in particular (Central Tray Service Cluster, Menu Production Personnel, Patient Tray Service Shift Leaders, and Clerical Dietitians) had 50 percent or less of their members respond positively to at least one of the job satisfaction questions. Except for Patient Tray Service Shift Leaders, these job groups perform more limited

jobs which involve fewer tasks and, thus, are narrower in scope. Menu Production Personnel and Clerical Dietitians showed 63 percent and 80 percent, respectively, responding that their training is utilized little or not at all. This may be due to the fact that Menu Production Personnel perform, basically, a regular cook's job, and Clerical Dietitians perform mainly a clerical job, neither of which involve tasks oriented more specifically to actual diet therapy. In spite of some of the low positive responses, however, all groups showed between 56 percent and 100 percent responding that they intend to reenlist.

ANALYSIS OF DAFSC GROUPS

In addition to analysis of the career ladder structure, an examination of the skill levels is helpful in understanding the Diet Therapy specialty. The DAFSC analysis compares the skill levels, highlighting differences in the tasks performed at these levels. This information is also useful in evaluating how well various career ladder documents, such as AFR 39-1 Specialty Descriptions and the Specialty Training Standard (STS), reflect what career ladder personnel are actually doing in the field.

Because a comparison of duty and task performance between 3- and 5-skill level (DAFSC 92630 and 92650) personnel indicates there are only minor differences in the jobs they perform, they are discussed as one group in this report. Only two 9-skill level personnel were in the sample, and their jobs were similar to 5- and 7-skill level personnel. Because of the small number, they will not be included in this discussion. The distribution of skill-level groups across the career ladder jobs is shown in Table 7. To give a sense of the progression through the skill levels, relative time spent on each duty by skill level group is presented in Table 8.

Skill-Level Descriptions

DAFSC 92630/92650. There are 390 airmen in the sample (78 percent) qualified at a 3- or 5-skill level. The work at these levels consists primarily of food preparation and serving, along with cleaning and maintenance of facilities. As Table 8 shows, the largest portion of their time (22 percent) is spent performing tasks within the Menu Production Duty (Duty F). Preparing Serving Lines and Serving Foods (Duty H) and Cleaning and Maintaining Food Service Facilities (Duty I) are the two next largest consumers of their time, each representing 15 percent of their total job time. Note that 56 percent of the 3- and 5-skill level personnel are contained in the Medical Food Service Cluster (see Table 7), whose main job includes these duties (as discussed in the SPECIALTY JOBS section). On the average, 3- and 5-skill level personnel perform 110 tasks. The top 30 tasks, in terms of percent members performing, are listed in Table 9.

TABLE 7

DISTRIBUTION OF DAFSC GROUP MEMBERS ACROSS CAREER LADDER GROUPS
(PERCENT RESPONDING)

JOB GROUPS	DAFSC 92630/50	DAFSC 92670
I. MEDICAL FOOD SERVICE CLUSTER (N=254)	56	32
II. CENTRAL TRAY SERVICE (CTS) CLUSTER (N=45)	12	0
III. MENU PRODUCTION PERSONNEL (N=8)	2	1
IV. PATIENT TRAY SERVICE (PTS) SHIFT LEADERS (N=6)	*	4
V. CLERICAL DIETITIANS (N=5)	1	0
VI. STOREROOM MAINTENANCE CLUSTER (N=32)	7	5
VII. SUPERVISOR CLUSTER (N=67)	3	50
VIII. FUND CUSTODIANS (N=5)	1	1
IX. CLINICAL DIETITIANS (N=28)	7	2
PERCENT NOT GROUPED	11	5

* Less than half of 1 percent

TABLE 8

RELATIVE PERCENT TIME SPENT ON DUTIES BY DAFSC GROUPS

DUTIES	DAFSC 92630/50	DAFSC 92670
A ORGANIZING AND PLANNING	3	12
B DIRECTING AND IMPLEMENTING	3	12
C INSPECTING AND EVALUATING	3	13
D TRAINING	2	11
E PERFORMING ADMINISTRATIVE FUNCTIONS	8	12
F PERFORMING MENU PRODUCTION	22	9
G PERFORMING THERAPEUTIC FOOD PREPARATION	11	4
H PREPARING SERVING LINES AND SERVING FOODS	15	5
I CLEANING AND MAINTAINING FOOD SERVICE FACILITIES	15	5
J PREPARING THERAPEUTIC INFLIGHT MEALS (CTIM)	1	*
K APPLYING DIET THERAPY AND CLINICAL NUTRITION	8	9
L MAINTAINING STOREROOMS	8	7
M COOKING UNDER FIELD CONDITIONS	*	*

* Less than 1 percent

DAFSC 92670. The 107 members of this group (22 percent of the total sample) perform an average of 124 tasks. As would be expected, most of these tasks relate to the supervisory duties. The transition from the 5-skill level to the 7-skill level is clearly marked by an increase in supervisory, training, and administrative responsibilities and a corresponding decrease in performance of tasks involving preparing and serving food and cleaning facilities. This shift in responsibilities from the 3- and 5-skill levels to the 7-skill level is demonstrated in Table 8. Note that 60 percent of the total job time of 7-skill level personnel is consumed by tasks within the supervisory, training, and administrative duties (Duties A through E). This fact is consistent with the specialty jobs identified in the analysis, as 50 percent of the 7-skill level personnel are contained in the Supervisor Cluster (see Table 7 and discussion in SPECIALTY JOBS section). The extent of the supervisory nature of their job is shown in Table 10, which lists the top 30 tasks in terms of percent members performing.

As stated in the above discussion, there is a great deal of difference between jobs performed by 92630 and 92650 personnel and jobs performed by 92670 personnel. The 3- and 5-skill level personnel concentrate on preparing and serving food and maintaining facilities, while the 7-skill level personnel concentrate on performing supervisory, training, and administrative tasks. Representative differences in tasks performed are presented in Table 11. The difference in responsibilities of the various skill-levels is consistent with the AFR 39-1 Specialty Descriptions, discussed in the next section.

COMPARISON OF DATA TO AFR 39-1 SPECIALTY DESCRIPTIONS

AFR 39-1 Specialty Descriptions are intended to provide a broad overview of duties and responsibilities for each skill level of a specialty. To verify the completeness and accuracy of the 926X0 specialty descriptions, survey data were compared to the October 1983 AFR 39-1 Specialty Descriptions. The comparison shows they accurately portray the duties and responsibilities of the Diet Therapy career ladder. The specialty description for Diet Therapy Specialist (AFSC 92610, 92630, and 92650), which outlines responsibilities primarily related to preparing and serving regular and therapeutic diets, as well as supply and other administrative duties, is complete and well supported by survey data. The description for Diet Therapy Supervisor (AFSC 92670), which outlines responsibilities related primarily to supervisory and diet therapy functions, is also well supported by survey data, though it would be more complete if superintendent duties were added.

Although the specialty description for Diet Therapy Superintendent (AFSC 92690) outlines responsibilities of a higher-level supervisory job (planning, organizing, directing, evaluating food service and diet therapy activities), the two 9-skill level personnel in the survey were performing jobs more closely related to that of 5- or 7-skill level personnel. As mentioned in the DAFSC Analysis, however, the number of 9-skill level personnel is too small to

TABLE 9
REPRESENTATIVE TASKS PERFORMED BY
92630/92650 PERSONNEL

TASKS	PERCENT MEMBERS PERFORMING (N=390)
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	79
F148 MAKE COFFEE, TEA, OR COCOA	79
F137 COOK EGGS	73
I249 CLEAN FLOORS OR WALLS	72
F168 PREPARE NOURISHMENTS (SNACKS)	71
F176 SAMPLE FOODS BY TASTE AND SMELL	71
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	71
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	71
G210 PREPARE ISOLATION TRAYS	70
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	69
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	68
H217 INSPECT COMPLETED PATIENT TRAYS	68
F154 PREPARE BROTHS	68
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	67
F164 PREPARE FRUITS	66
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	65
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	65
F149 MAKE GELATIN DESSERTS	64
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	64
H212 ARRANGE OR GARNISH FOODS	64
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	64
E97 COLLECT OR MAINTAIN AF FORMS 1094 (DIET ORDER)	64
F136 COLLECT WARD DIET ORDER CHANGES AND PROVIDE THEM TO FOOD PRODUCTION PERSONNEL	64
F155 PREPARE CANNED FOOD	63
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN' OR DIETITIAN'S GUIDELINES AND AFR 160-8	63
G188 PREPARE FOOD FOR DIABETIC DIETS ACCORDING TO GUIDELINES IN AF FORMS 2479 AND 2480 (DIABETIC)	63
F173 PREPARE SANDWICHES	63
G180 EVALUATE BULK NOURISHMENT REQUESTS TO DETERMINE APPROPRIATENESS OF REQUESTS	62
I264 CLEAN OR STORE PATIENT FOOD CARTS	62
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING OUT REQUIREMENTS	62

TABLE 10

REPRESENTATIVE TASKS PERFORMED BY 92670 PERSONNEL

TASKS	PERCENT MEMBERS PERFORMING (N=107)
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	85
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	85
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	84
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	83
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	80
D72 CONDUCT IN-SERVICE TRAINING	79
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	77
C65 INSPECT FOOD BEFORE, DURING, AND AFTER PREPARATION	75
A1 ASSIGN PERSONNEL TO INITIAL DUTY POSITIONS	74
A5 DETERMINE WORK PRIORITIES	73
B45 SUPERVISE PATIENT TRAY SERVICE	72
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD	71
A11 ESTABLISH OR DEVELOP OPERATING INSTRUCTIONS (OI), POLICY LETTERS, OR SELF-INSPECTION TASK LISTS	69
A21 PLAN WORK SCHEDULES	69
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	69
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	68
B42 SUPERVISE HANDLING, STORAGE, OR REFRIGERATION OF FOOD ITEMS	68
B46 WRITE CORRESPONDENCE	67
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	67
A22 SCHEDULE LEAVES OR PASSES	67
C59 EVALUATE WORK SCHEDULES	65
C54 EVALUATE OR RECOMMEND INDIVIDUALS FOR PROMOTION, UPGRADING, DEMOTION, OR DOWNGRADING	65
E118 PREPARE AND MAINTAIN AF FORMS 2578 (MEDICAL FOOD SERVICE WORK SCHEDULE)	64
A20 PLAN WORK ASSIGNMENTS	64
A2 ASSIGN SPONSORS FOR NEWLY ASSIGNED PERSONNEL	64
A12 ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	64
A9 DEVELOP WORK METHODS OR PROCEDURES	64
C51 EVALUATE INSPECTION REPORTS OR PROCEDURES	62
K316 MAKE WARD ROUNDS OR VISITS	62
A3 CONDUCT IN-SERVICE SANITATION PROGRAMS FOR ASSIGNED PERSONNEL	62

TABLE 11

REPRESENTATIVE TASK DIFFERENCES BETWEEN 92630/92650 PERSONNEL
AND 92670 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS	DAFSC 92630/92650 (N=390)	DAFSC 92670 (N=107)	DIFFERENCE
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	79	39	+40
F168 PREPARE NOURISHMENTS (SNACKS)	71	35	+36
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	71	35	+36
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	65	29	+36
I264 CLEAN OR STORE PATIENT FOOD CARTS	62	26	+36
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING OUT REQUIREMENTS	62	26	+36
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	64	29	+35
G210 PREPARE ISOLATION TRAYS	70	35	+35
I283 CLEAN AND CLEAN WORK TABLES AND AREAS	71	36	+35
I249 CLEAN FLOORS OR WALLS	72	37	+35
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	64	31	+33
H212 ARRANGE OR GARNISH FOODS	64	31	+33
F154 PREPARE BROTHS	68	35	+33
F148 MAKE COFFEE, TEA, OR COCOA	79	47	+32
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	63	31	+32
.	.	.	.
.	.	.	.
.	.	.	.
C59 EVALUATE WORK SCHEDULES	14	65	-51
A22 SCHEDULE LEAVES OR PASSES	15	67	-52
A2 ASSIGN SPONSORS FOR NEWLY ASSIGNED PERSONNEL	12	64	-52
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	18	71	-53
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	15	68	-53
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	29	83	-54
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	28	84	-56
A11 ESTABLISH OR DEVELOP OPERATING INSPECTIONS (OI), POLICY LETTERS, OR SELF- INSPECTION TASK LISTS	13	69	-56
D72 CONDUCT IN-SERVICE TRAINING	22	79	-57
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	28	85	-57
B46 WRITE CORRESPONDENCE	9	67	-58
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	24	85	-61

accurately draw conclusions about a "typical" 9-level job. Although this specialty description relates to 92690 personnel, a small group of 92670 personnel were identified in the analysis as Diet Therapy Superintendents (see discussion in Specialty Jobs section). This group performed tasks related to the duties and responsibilities mentioned in the 92690 specialty description. This specialty description does, therefore, accurately describe jobs being performed in the career ladder. It may be more accurate, however, to include these duties and responsibilities in the 7-level description.

ANALYSIS OF TAFMS GROUPS

To understand how jobs within a career ladder change with time and experience, occupational survey data are also analyzed by total active federal military service (TAFMS) groups. The Diet Therapy specialty is typical of most specialties, in that relative time spent on supervisory, administrative, and training tasks increases as experience and time in service increase. Correspondingly, there is a decrease in tasks related to regular and therapeutic food preparation and cleaning and maintaining food service facilities. This gradual change in emphasis is shown in Table 12, which presents relative time spent on duties for the different experience groups. There were two areas that accounted for 1 or less than 1 percent of any experience group's time: preparing therapeutic inflight meals (CITM) and cooking under field conditions.

First-Enlistment Personnel

In this study, 224 respondents are in their first enlistment (1-48 months TAFMS), accounting for 45 percent of the survey sample. Figure 2 shows the distribution of first-enlistment personnel across the job groups discussed in the SPECIALTY JOBS section of this report. Over half (55 percent) are contained in the Medical Food Service Cluster. The remaining first-enlistment personnel are dispersed over several other jobs, with 17 percent in the Central Tray Service (CTS) Cluster. Other jobs, which included less than 10 percent each, are Clinical Dietitians, Storeroom Maintenance Cluster, Clerical Dietitians, and Menu Production Personnel. Although some first-enlistment personnel perform jobs within the Supervisor Cluster, this job group included less than 1/2 percent. Comparing Figure 2 to Figure 1 (in the SPECIALTY JOBS section) shows the increase in the percentage of first-termers performing food preparation and serving jobs and the absence of first-termers performing shift leader or supervisory jobs.

As Table 12 shows, first-enlistment personnel spend the greatest single portion of their total job time (25 percent) performing tasks related to menu production, which involves cooking and preparing food. Preparing serving lines and serving foods, and cleaning and maintaining food service facilities are the next two most time-consuming duties, each with 17 percent of their total job time. A list of the top 35 tasks, in terms of percent first-enlistment personnel performing them, is given in Table 13.

TABLE 12

PERCENT TIME SPENT ON DUTIES BY 926XG EXPERIENCE GROUPS
(RELATIVE TIME SPENT)

	EXPERIENCE GROUPS (MONTHS TAFMS)					
	1-48 (N=224)	49-96 (N=119)	97-144 (N=57)	145-192 (N=50)	193-240 (N=36)	241+ (N=11)
A ORGANIZING AND PLANNING	2	5	7	13	13	14
B DIRECTING AND IMPLEMENTING	*	4	9	11	13	13
C INSPECTING AND EVALUATING	1	5	7	12	16	16
D TRAINING	*	3	8	10	11	12
E PERFORMING ADMINISTRATIVE FUNCTIONS	7	8	10	12	11	14
F PERFORMING MENU PRODUCTION	25	20	15	9	10	6
G PERFORMING THERAPEUTIC FOOD PREPARATION	13	10	8	5	2	3
H PREPARING SERVING LINES AND SERVING FOOD	17	13	9	5	4	4
I CLEANING AND MAINTAINING FOOD SERVICE FACILITIES	17	13	9	7	4	4
J PREPARING THERAPEUTIC INFLIGHT MEALS (CTIM)	1	1	1	*	*	*
K APPLYING DIET THERAPY AND CLINICAL NUTRITION	9	7	7	8	8	10
L MAINTAINING STOREROOMS	6	9	9	9	7	5
M COOKING UNDER FIELD CONDITIONS	*	*	*	*	*	*

* Less than 1 percent

FIGURE 2

DISTRIBUTION OF FIRST-ENLISTMENT PERSONNEL
ACROSS SPECIALTY JOB GROUPS
(PERCENT MEMBERS PERFORMING)

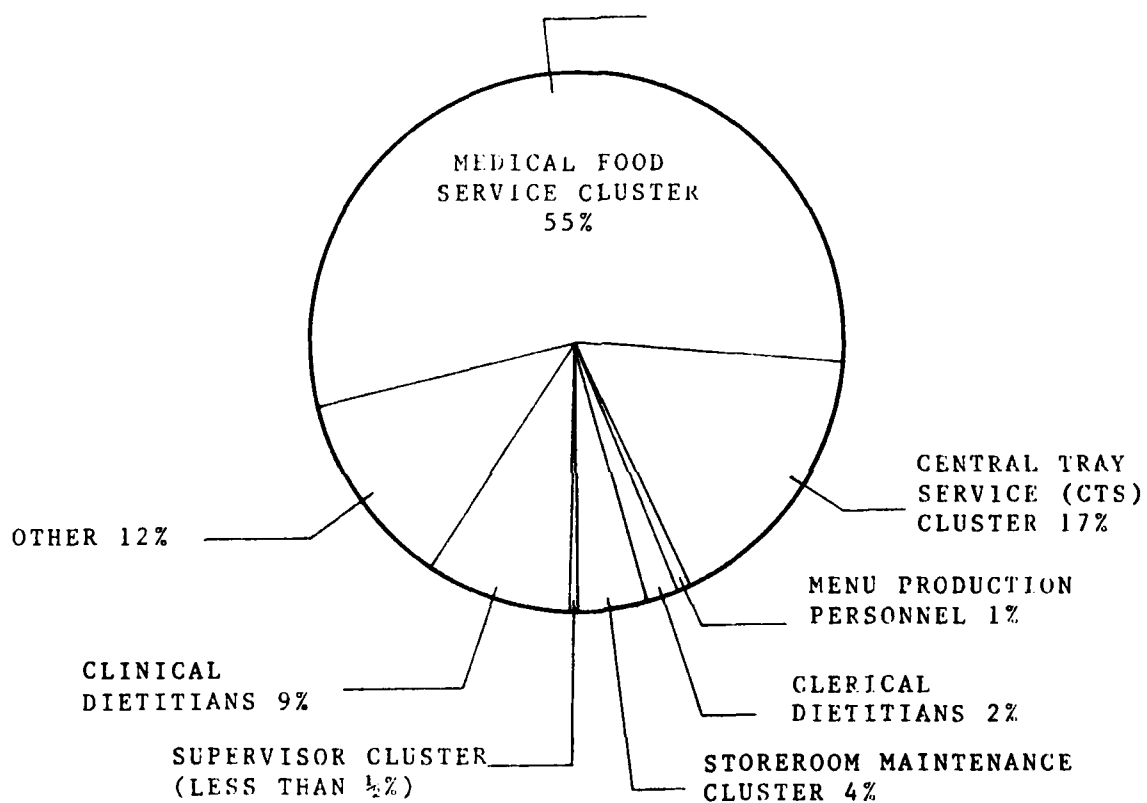


TABLE 13

REPRESENTATIVE TASKS PERFORMED BY FIRST-ENLISTMENT PERSONNEL
(1-48 MONTHS TAFMS)

TASKS	PERCENT MEMBERS PERFORMING (N=224)
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	82
F148 MAKE COFFEE, TEA, OR COCOA	81
F168 PREPARE NOURISHMENTS (SNACKS)	76
I249 CLEAN FLOORS OR WALLS	76
F137 COOK EGGS	75
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	75
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	75
G210 PREPARE ISOLATION TRAYS	75
F154 PREPARE BROTHS	72
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	72
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	71
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	70
F176 SAMPLE FOODS BY TASTE AND SMELL	70
F136 COLLECT WARD DIET ORDER CHANGES AND PROVIDE THEM TO FOOD PRODUCTION PERSONNEL	69
F149 MAKE GELATIN DESSERTS	69
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	68
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	67
F164 PREPARE FRUITS	67
I264 CLEAN OR STORE PATIENT FOOD CARTS	67
H222 PORTION INDIVIDUAL SERVINGS OR BEVERAGES	67
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	67
H217 INSPECT COMPLETED PATIENT TRAYS	66
F173 PREPARE SANDWICHES	66
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	66
K316 MAKE WARD ROUNDS OR VISITS	65
G211 SELECT SUBSTITUTE FOODS HAVING EQUIVALENT NUTRITIVE VALUES	65
H212 ARRANGE OR GARNISH FOODS	65
H235 SERVE FOOD ON SERVING LINES	64
G188 PREPARE FOOD FOR DIABETIC DIETS ACCORDING TO GUIDELINES IN AF FORMS 2479 AND 2480 (DIABETIC)	64
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING OUT REQUIREMENTS	63
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	63
I275 CLEAN TOASTERS	63
I285 DISPOSE OF FOOD WASTES	63
H221 PERFORM CLEANING OF SERVING LINE AS REQUIRED	63
F155 PREPARE CANNED FOOD	63

JOB SATISFACTION ANALYSIS

Normal procedures for TAFMS analysis include examining job satisfaction indicators for each experience group in comparison to samples of similar career ladders; however, because no medical career ladders were surveyed in 1984, and only one (with a small sample size) in 1983, meaningful comparative samples are not available for this report. Instead, an examination of the job satisfaction indicators of each experience group within the 926X0 career ladder will provide some understanding of factors which may affect the job performance of airmen in the Diet Therapy career ladder. To understand trends in these factors over time, it may also be helpful to examine job satisfaction indicators from the previous survey (1978).

Five attitude questions covering job interest, perceived utilization of talents, perceived utilization of training, sense of accomplishment from the job, and reenlistment intentions provide indicators of job satisfaction. Table 14 shows responses to these questions for the experience groups in the current survey. In nearly every case, the percentage of positive responses increases as experience and time in service increase. This trend is especially evident for expressed job interest, where only 42 percent of the 1-48 months TAFMS group find their job interesting, while 54 percent of the 49-96 months TAFMS group and 76 percent of the 97+ months TAFMS group find their job interesting. The nature of the job may have some impact on the low response for first-termers and the high response for the career (97+ months TAFMS) group. First-termers tend to perform a more routine job, often involving food preparation and serving only, with little work that could be uniquely termed "diet therapy." But, as time in service increases, the job becomes more supervisory in nature, involving more interface with people and more responsibility, along with more involvement in actual diet therapy. These and other factors may also have some impact on the other job satisfaction indicators. Note that perceived use of training looks fairly high for all groups; though many first-termers may not find their jobs interesting, the majority do feel their training is used well. Also, most intend to reenlist.

To see how response to these job satisfaction questions has changed over time, data from the current survey (1985) are compared to data from the previous survey, done in 1978. Table 15 presents these 2 samples side by side for each experience group. Although the percent responding positively has increased in most cases since the last survey, the increase is only slight, and many job satisfaction indicators still show low percentages responding positively for groups with less experience. For example, only 42 percent of the first-termers in 1985 found their jobs interesting, compared to 40 percent in 1978. And only 57 percent felt their talents were used well in 1985, as compared to 45 percent in 1978.

TABLE 14

JOB SATISFACTION INDICATORS BY EXPERIENCE GROUPS
(PERCENT RESPONDING)*

	1-48 MONTHS TAFMS (N=224)	49-96 MONTHS TAFMS (N=119)	97+ MONTHS TAFMS (N=154)
<u>EXPRESSED JOB INTEREST:</u>			
INTERESTING	42	54	76
SO-SO	35	26	14
DULL	22	19	9
<u>PERCEIVED USE OF TALENTS:</u>			
FAIRLY WELL TO PERFECTLY	57	60	86
LITTLE OR NOT AT ALL	42	40	12
<u>PERCEIVED USE OF TRAINING:</u>			
FAIRLY WELL TO PERFECTLY	71	74	91
LITTLE OR NOT AT ALL	28	24	8
<u>SENSE OF ACCOMPLISHMENT FROM JOB:</u>			
SATISFIED	51	50	66
NEUTRAL	17	16	9
DISSATISFIED	31	32	23
<u>REENLISTMENT INTENTIONS:</u>			
WILL/PROBABLY WILL REENLIST	59	79	73
WILL NOT/PROBABLY WILL NOT REENLIST	39	21	7
WILL RETIRE	2	0	18

* Numbers may not equal 100 percent due to nonresponse and rounding

TABLE 15

COMPARISON OF JOB SATISFACTION INDICATORS BY TAFMS GROUPS*
(PERCENT MEMBERS RESPONDING)

	1-48 MOS TAFMS		49-96 MOS TAFMS		97+ MOS TAFMS	
	1978 (N=145)	1985 (N=224)	1978 (N=69)	1985 (N=119)	1978 (N=146)	1985 (N=154)
<u>EXPRESSED JOB INTEREST:</u>						
INTERESTING	40	42	53	54	75	76
SO-SO	27	35	28	26	10	14
DULL	31	22	16	19	10	9
<u>PERCEIVED USE OF TALENTS:</u>						
FAIRLY WELL TO PERFECTLY	45	57	78	60	81	86
LITTLE OR NOT AT ALL	54	42	22	40	18	12
<u>PERCEIVED USE OF TRAINING:</u>						
FAIRLY WELL TO PERFECTLY	64	71	80	74	81	91
LITTLE OR NOT AT ALL	36	28	20	24	17	8
<u>REENLISTMENT INTENTIONS:</u>						
WILL/PROBABLY WILL REENLIST	46	59	56	79	78	73
WILL NOT/PROBABLY WILL NOT REENLIST**	52	41	34	21	19	25

* Columns may not equal 100 percent due to no response and rounding

** Includes those persons who will retire

TRAINING ANALYSIS

Information gathered with the occupational survey is also used to assist the development or evaluation of training programs that are relevant for personnel working in their first assignments. Some factors which may be used include percent of first-job (1-24 months TAFMS) or first-enlistment (1-48 months TAFMS) personnel performing tasks, in addition to secondary task factors such as training emphasis or task difficulty ratings (as explained in the Task Factor Administration section). These factors may be used to evaluate 926X0 Specialty Training Standards (STS) and basic course Plans of Instruction (POI), based on the matching of inventory tasks to appropriate sections of the STS and POI by technical school personnel. Computer listings which display the STS or POI with matched tasks and survey data are used in the analysis to show which sections of the STS or POI are supported by survey data or are most relevant to the career ladder. They may also be used to show which tasks not matched to these documents may need to be included due to the percent of 926X0 personnel performing them and their importance to training. To aid in any further detailed review of training documents, these computer displays have been forwarded to the technical school. A summary of that information is contained in this section.

Training Emphasis and Task Difficulty Data

The objective of collecting TE and TD ratings is to develop rank-ordered listings of tasks in terms of importance for first-term training and in terms of difficulty. These lists of inventory tasks are included in both the Analysis and Training Extracts, with TE and TD ratings accompanying each inventory task displayed in the Training Extract. (For a more detailed explanation of both types of ratings, see Task Factor Administration in the SURVEY METHODOLOGY section). Tasks performed by moderate to high percentages of personnel may warrant resident technical training. TE and TD ratings (composed of the opinions of experienced career ladder personnel) are secondary factors that may assist training developers in deciding which tasks should be emphasized in entry-level training. Those tasks receiving high task-factor ratings, but low percentages of personnel performing them, may be more appropriately planned for OJT programs within the career ladder. Low task factor ratings may highlight tasks best left out of training for new 926X0 personnel, but this decision must be weighed against percentages of personnel performing the task, command concerns, and other task considerations.

Specialty Training Standard (STS)

The STS for a career ladder is intended to provide comprehensive coverage of the tasks performed by personnel in the ladder. To help evaluate the effectiveness of the 926X0 STS, dated July 1983 (with Changes 1, 2, and 3), STS sections were compared to survey data. Sections containing general information or knowledge areas were not evaluated. In addition to looking at how well survey data supported STS items, analysis also examined what other areas might need to be included in the STS, based on survey findings.

Analysis shows the STS sections are well supported by survey data; tasks matched to the various STS paragraphs and subparagraphs are performed by a substantial percentage of 926X0 personnel. One minor concern, however, is related to a number of performance items that did not have inventory tasks matched to them. This could mean that an applicable task has not been matched or that there are no clearly defined inventory tasks appropriate to that element. In the case of nine of these items which relate to a hospital or clinic OPlan for medical response to peacetime mass casualty situations, criticality of the tasks may require these elements be included, even though they are performed by low percentages. Subject-matter specialists, however, should review these items listed in Table 16, to assure that inclusion in the STS is justified. If that is the case, the possible reason these elements are unmatched should be pursued and necessary adjustments made. If it is determined there are no tasks in the inventory which can be matched to those elements which are valid performance items, the Occupational Measurement Center (OMC) requests that subject-matter specialists forward them to OMC for review and use in the next inventory rewrite.

A second area of analysis involves examining tasks not matched to any item in the STS. Unreferenced tasks, performed by at least 20 percent of a major group, such as first-enlistment personnel, are performed to an extent great enough that they should be included in the STS. Those with high TE ratings have been identified by senior NCOs as important for first-enlistment training and, thus, probably also should be included in the STS. High TD may be an indication that those tasks could be difficult to learn or teach. Likewise, they may be critical or especially important to the career ladder and, therefore, should be considered for inclusion in the STS. In reviewing the computer-generated listing, which has been forwarded to the technical school, specialists should pay special attention to unreferenced tasks with any of the factors just mentioned.

Tasks not matched to any element of the STS are listed at the end of the STS computer listing. These were reviewed to determine if they were concentrated around a common function. Many of the unmatched tasks were related to supervisory, administrative, or training functions, and were performed primarily by 7-skill level personnel. Another set of unmatched tasks were those within the duty of cooking under field conditions. Thirty of the 32 tasks within this duty were not included in the STS, but these were performed by only small percentages of 926X0 personnel, and none were high in training emphasis. One set of tasks, however, did have substantial percentages of personnel--especially first-enlistment personnel--performing them. Forty of the 50 tasks within the duty of cleaning and maintaining food service facilities were not matched to the STS: 34 of these unmatched tasks were performed by 20 percent or more 926X0 first-enlistment personnel, with several performed by 50 percent or more. These cleaning and maintenance tasks should be reviewed to determine if they should be included in the STS. Other tasks with 20 percent or more of first-enlistment or 5-skill level personnel also should be reviewed for possible inclusion.

TABLE 16

STS ITEMS NOT MATCHED TO INVENTORY TASKS

2C(2)(a)	PROVIDE IMMEDIATE MEDICAL CARE WITH BASIC CARDIAC LIFE SUPPORT
2C(2)(b)	PROVIDE IMMEDIATE MEDICAL CARE FOR SHOCK
2C(2)(c)	PROVIDE IMMEDIATE MEDICAL CARE FOR HEMMORHAGE
2C(2)(d)	PROVIDE IMMEDIATE MEDICAL CARE FOR WOUNDS
2C(2)(e)	PROVIDE IMMEDIATE MEDICAL CARE FOR FRACTURES
2C(2)(f)	PROVIDE IMMEDIATE MEDICAL CARE FOR BURNS
2C(3)	TRANSFER LITTER PATIENTS
2C(4)	LOAD AND UNLOAD PATIENTS INTO/OUT OF VEHICLES USED FOR TRANSPORTATION OF PATIENTS
2C(5)	MAINTAIN SANITARY FIELD ENVIRONMENT
2H	PARTICIPATE IN CHEMICAL WARFARE CONFIDENCE EXERCISES
6B	LOCATE INFORMATION IN COMMERCIAL PUBLICATIONS
12C(4)	MEASURE INGREDIENTS
12F(5)(b)	PREPARE COMMERCIAL TUBE FEEDINGS
12G(1)(f)	CARVE POULTRY FOR INDIVIDUAL SERVINGS
12G(3)(d)	SERVE INDIVIDUAL NOURISHMENTS TO INPATIENTS

Nine of the unmatched tasks had high training emphasis ratings and at least 37 percent of the first-enlistment personnel performing them (see Table 17). Because of the substantial percentage of first-termers performing these tasks and the high training emphasis ratings, which indicate they have been identified by senior NCOs as important for first-term training, these tasks especially should be included in the STS and identified for resident course training. Although they have not been matched to STS elements, they are matched to POI elements, indicating they are taught in either the fundamentals food services course at Lowry AFB or the basic course at Sheppard AFB. Possible reasons could be that the STS is incomplete where these tasks are concerned, or that they are appropriate to current STS items but were left out in the matching process. In any case, these tasks should be reviewed to assure the STS is complete.

Plan of Instruction (POI)

Personnel entering the Diet Therapy career ladder first attend the 3ABR62230/3AQR92630 Food Services/Diet Therapy Fundamentals course at Lowry AFB CO. This course covers preparing, cooking, and serving foods, and lasts 8 weeks and 4 days. Following this course, incumbents attend the Diet Therapy Course 3ABR92630 at Sheppard School of Health Care Sciences, Sheppard AFB TX. This course covers preparing and serving regular and therapeutic diets. Based on previously mentioned assistance from training specialists at both Lowry AFB and Sheppard AFB, the POIs for both courses were matched to survey task statements. Computer printouts were then generated to display the results of the matching for use in this analysis and for a detailed review of training. In general, a POI contains two types of items: knowledge items and performance

TABLE 17

TASKS MATCHED TO STS PERFORMED BY 37 PERCENT OR MORE
WITH HIGH TRAINING EMPHASIS

TASKS	1st ENL PERFORMING	TRAINING EMPHASIS
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	70%	5.83
F149 MAKE GELATIN DESSERTS	69%	6.05
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMs 2483 and 2484 (DENTAL SOFT - T&A SOFT)	66%	6.40
H235 SERVE FOODS ON SERVING LINES	64%	5.69
G197 PREPARE FOOD FOR MINIMAL-RESIDUE DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	50%	5.98
G193 PREPARE FOOD FOR HIGH FIBER DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	50%	5.81
F171 PREPARE PUDDINGS	49%	5.74
F159 PREPARE DEHYDRATED FOODS (E.G., INSTANT MASHED POTATOES) FOR COOKING OR SERVING	47%	5.69
K307 CALCULATE OR APPLY CARBOHYDRATE REPLACEMENT FOR PATIENTS ON DIABETIC DIETS	37%	5.74

items. Since task statements are relevant to performance items rather than knowledge items, only the performance items will be evaluated in this analysis.

Because both 622X0 (Food Services) and 926X0 (Diet Therapy) personnel attend the first course, it will be evaluated mainly to determine relevance to the 926X0 career ladder. In general, performance blocks in the Diet Therapy Fundamentals/Food Services course POI appear relevant and important to resident training for first-enlistment 926X0 personnel, based on survey data. All performance items but one are matched to inventory tasks performed by at least 30 percent (with most over 50 percent) of the 926X0 first-termers, and nearly all of these have above-average or high training emphasis ratings. The only performance item not supported by survey data (III.1.v., which related to operating equipment) is supported by responses to a background question on operating equipment, since this area was measured using a background question on specific pieces of equipment, rather than task statements relating to operating those pieces of equipment.

One concern about this fundamentals course, based on interviews with personnel in the field and at the technical school, is that performance items in the POI may not be taught to the level justified by the extent to which related tasks are performed in the field. Personnel at Lowry Technical Training Center may find it helpful to review the computer listings in the training

analysis to evaluate how important these performance blocks in the POI are, and correspondingly, determine the level to which they should be taught.

The second course, 3ABR92630, Diet Therapy Specialist, seems very complete. Several items, however, are not supported by survey data. These items, shown in Table 18, are matched to tasks performed by fewer than 30 percent of the 926X0 first-enlistment personnel. Because most of these tasks have near-average or above-average training emphasis ratings (and two have high training emphasis ratings), senior NCOs do consider these tasks important for first-term training. The low percentages of first-termers actually performing them, however, indicate they may be more appropriately trained through OJT. Training specialists should review these areas to determine if they should be excluded from the course.

As with the STS, another part of the analysis of the POI involves examining tasks not matched to items in the POI. Of 138 tasks not referenced to either of the 2 plans of instruction, only 7 are performed by 30 percent or more of the 926X0 first-enlistment personnel. These tasks, listed in Table 19, should be reviewed by training specialists to determine if they are appropriate for resident course training.

Based on the evaluation of performance items in both POIs, there appears to be little overlap in the two courses. Performance items in the first course seem to relate mainly to preparing and cooking basic foods and to cleaning and maintaining facilities, while performance items in the second course seem to relate more specifically to therapeutic diets and medical food service activities. Because task performance data were used to evaluate only the performance items in the POI, training specialists may find it helpful to review the knowledge items in the two POIs, to determine if there is any overlap or to determine if any of the knowledge items in the fundamentals/food services course are irrelevant to Diet Therapy first-enlistment personnel. For example, some storeroom maintenance knowledge is part of both courses; on the other hand, missile feeding or Prime Rib instruction may not pertain to Diet Therapists. Training specialists may wish to recommend these parts of the fundamentals/food services course be taught at the end of the course, and require Diet Therapy personnel to attend only those blocks necessary for their career ladder.

ANALYSIS OF CONUS VERSUS OVERSEAS GROUPS

Of the AFSC 92650 personnel in the sample, 211 are assigned within the continental United States (CONUS) and 59 are assigned overseas. A comparison of the survey data of these groups showed minor differences between them. The average grade for both groups is E-4. First-enlistment personnel comprise 49 percent of the CONUS group and 31 percent of the overseas group. As would be expected, the two largest MAJCOM users of the overseas group are USAFE (39 percent) and PACAF (29 percent), while the two largest MAJCOM users of the CONUS group are SAC (29 percent) and ATC (23 percent). Job satisfaction is

TABLE 18

ITEMS FROM POI J3ABR92630 NOT SUPPORTED BY SURVEY DATA

ITEM/TASK*	1ST ENL PERCENT PERFORMING	TE ¹	TD ²
I.A.2.g. SPECIFY THE PROCEDURES USED IN PREPARING COOKED THERAPEUTIC INFLIGHT MEALS WITH 80 PERCENT ACCURACY (3 HRS) G198 PREPARE FOOD FOR MODIFIED DIETS IN SUPPORT OF AEROMEDICAL EVACUATION	21%	4.69	5.72
II.A.2.c. GIVEN A LIST OF STANDARD AIR FORCE PUBLICATIONS BY NUMBER OR TITLE AND AFR 0-2, LOCATE INFORMATION (3.5 HRS) E105 LOCATE PUBLICATIONS USING AFR 0-2 TO LOCATE STANDARD AIR FORCE PUBLICATIONS	7%	2.48	4.47
II.A.2.j. GIVEN AF FORM 287 AND A LIST OF SPECIFIC SUBSISTENCE ITEMS, ORDER SUBSISTENCE WITH NO INSTRUCTOR ASSISTS (1.5 HRS) L331 ORDER FOOD ITEMS FROM COMMISSARY	16%	4.67	5.72
II.A.2.m. GIVEN AF FORMS 544, 1087, 1339, AND MALACS CASH REGISTER RECEIPT, COMPLETE AF FORM 544, RATION EARNINGS RECORD (6.5 HRS) E113 PERFORM MEAL COUNT DUTIES (CASHIER DUTIES)	27%	6.07	4.19
II.A.2.o. DETERMINE THE PROCEDURES USED TO FILE MEDICAL FOOD SERVICE FORMS (1.5 HRS) E101 FILE, ANNOTATE, OR UPDATE ADMINISTRATIVE OR RECORDS FILES	12%	2.38	5.50
II.A.2.p. DETERMINE THE PROCEDURES USED WHEN INSPECTING MEDICAL FOOD SERVICE PERSONNEL FOR PROPER SANITATION STANDARDS (1 HR) C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	7%	4.83	4.58

*NOTE: Only matched task with highest percent first-enlistment personnel performing shown on table

¹Average TE is 3.75; high TE is 5.69²Average TD is 5.00; high TD is 6.00

TABLE 19

TASKS NOT REFERENCED TO POI G3AQR92630 OR POI J3ABR92630
WITH 30 PERCENT OR MORE PERFORMING

TASKS	1ST ENL PERCENT PERFORMING	TE ¹	TE ²
F136 COLLECT WARD DIET ORDER CHANGES AND PROVIDE THEM TO FOOD PRODUCTION PERSONNEL	69%	6.24	3.90
I285 DISPOSE OF FOOD WASTES	63%	4.90	3.70
H214 ASSIST PATIENTS THROUGH SERVING LINE AS NEEDED	51%	5.52	3.79
H237 SET UP OR REPLENISH SILVERWARE OR TRAY RACKS	47%	4.52	3.13
F156 PREPARE COMMERCIAL BAKERY ITEMS	38%	4.52	3.37
L339 PREPARE OR MAINTAIN AF FORMS 2582 (FOOD TEMPERATURE CHART)	34%	5.24	4.52
L325 COMPLETE AF FORMS 638 (REFRIGERATION UNIT STANDARD CHART)	30%	4.52	3.46

¹Average TE is 3.75; high TE is 5.69

²Average TD is 5.00; high TD is 6.00

slightly higher for the CONUS group than for the overseas group (see Table 20), but both groups still have fairly high percentages intending to reenlist. Duty and task performance data also showed only minor differences. A slightly greater percentage of CONUS members perform some of the tasks more directly related to diet therapy, such as modifying or reviewing diets or meal patterns for individual diets and write diets using dietary Kardex files. A slightly greater percentage of overseas members perform tasks within the duty of preparing therapeutic inflight meals (CTIM), such as placing and storing inflight meals. No task, however, has a difference of more than 22 percent in terms of percent members performing.

MAJCOM ANALYSIS

Another area of analysis involves examining duty and task performance across major commands (MAJCOM). Table 21 shows the relative time spent performing duties by MAJCOMs which represent at least 5 percent of the sample. Note that time spent on the supervisory, training, and administrative duties is similar between the MAJCOMs. Other duties show more variation.

Overall, most differences were minor between MAJCOMs. The most notable, though, is with AFSC. This command, as a group, seems more diversified; in other words, instead of one typical job that most personnel perform, there may be several more specialized jobs. This may be due to the large hospitals owned by AFSC. Also, as Table 21 shows, personnel in this command tend to spend less time performing the more routine tasks, such as those related to menu production, preparation of serving lines, and cleaning and maintenance of food service facilities, and more time on tasks more directly related to diet therapy and clinical nutrition. Another notable difference between MAJCOMs involves preparing therapeutic inflight meals (CTIM). Two MAJCOM groups spend more time on tasks within this duty: MAC and PACAF. One duty performed very little by any MAJCOM group is that of cooking under field conditions; relative time spent on tasks within this duty was less than 1 percent for all groups.

Examining background information for the different MAJCOMs shows some variations. For example, personnel in all MAJCOMs listed on the table have an average grade of E-4, except for PACAF, whose personnel have an average grade E-5. There are fewer junior people in PACAF; only 19 percent are in their first enlistment. Thirty percent of those in TAC and 34 percent of those in USAFE are in their first enlistment, but the other commands have from 46 percent to 63 percent (for AFSC) of their personnel in their first enlistment. Two notable pieces of equipment, Ala Carte cash registers and Aladdin food tray systems, also showed some variations. Only 4 MAJCOMs report using the Ala Carte cash registers; SAC (61 percent), PACAF (7 percent), USAFE (3 percent), MAC (2 percent)). Aladdin food tray systems were used by more MAJCOMs, with only small variations: SAC (35 percent), PACAF (29 percent), ATC (7 percent), AFSC (6 percent), TAC (6 percent), and MAC (5 percent). Job satisfaction indicators are nearly the same, though, for all MAJCOMs.

TABLE 20
CONUS VERSUS OVERSEAS JOB SATISFACTION COMPARISON
(PERCENT RESPONDING)*

	92650 CONUS (N=211)	92650 OVERSEAS (N=59)
<u>EXPRESSED JOB INTEREST:</u>		
INTERESTING	53	42
SO-SO	28	29
DULL	19	25
<u>PERCEIVED USE OF TALENTS:</u>		
FAIRLY WELL TO PERFECTLY	67	53
LITTLE OR NOT AT ALL	32	44
<u>PERCEIVED USE OF TRAINING:</u>		
FAIRLY WELL TO PERFECTLY	75	68
LITTLE OR NOT AT ALL	24	27
<u>SENSE OF ACCOMPLISHMENT FROM JOB:</u>		
SATISFIED	54	48
NEUTRAL	15	14
DISSATISFIED	30	48
<u>REENLISTMENT INTENTIONS:</u>		
WILL/PROBABLY WILL REENLIST	67	75
WILL NOT/PROBABLY WILL NOT REENLIST	29	24
WILL RETIRE	3	2

* Numbers may not equal 100 percent due to nonresponse and rounding

TABLE 21

PERCENT TIME SPENT PERFORMING DUTIES BY MAJCOMs

DUTIES	USAFE (N=35)	AFSC (N=32)	ATC (N=82)	MAC (N=57)	PACAF (N=31)	SAC (N=133)	TAC (N=84)
A ORGANIZING AND PLANNING	5	10	4	3	7	6	4
B DIRECTING AND IMPLEMENTING	6	7	4	4	5	5	5
C INSPECTING AND EVALUATING	6	6	4	4	6	6	6
D TRAINING	4	4	7	3	5	3	3
E PERFORMING ADMINISTRATIVE FUNCTIONS	8	18	9	7	9	8	7
F PERFORMING MENU PRODUCTION	20	9	19	21	14	20	22
G PERFORMING THERAPEUTIC FOOD PREPARATION	10	9	8	11	10	10	9
H PREPARING SERVING LINES AND SERVING FOOD	14	6	12	15	13	13	12
I CLEANING AND MAINTAINING FOOD SERVICE FACILITIES	11	4	16	15	8	13	14
J PREPARING THERAPEUTIC INFLIGHT MEALS (CTIM)	1	1	1	3	3	**	**
K APPLYING DIET THERAPY AND CLINICAL NUTRITION	8	19	6	9	10	9	6
L MAINTAINING STOREROOMS	7	6	7	5	10	7	10
M COOKING UNDER FIELD CONDITIONS	**	**	**	**	**	**	**

* Columns may not equal 100 percent due to rounding

** Denotes less than .5 percent

Analysis of data for first-enlistment personnel by MAJCOMs shows similar findings. Again, task performance differences are minor, except for personnel in AFSC (see Table 22). In this command, first-enlistment personnel spend 21 percent of their job time performing administrative tasks and 26 percent applying diet therapy and clinical nutrition. Correspondingly, they spend less time performing the more routine tasks related to preparing and serving food and cleaning and maintaining food service facilities. The jobs within AFSC tend to be more diverse, indicating a greater degree of specialization and less similarity between individuals. Another difference between MAJCOMs for first-enlistment personnel--as with the total sample for each MAJCOM--is that personnel in MAC and PACAF spend slightly more time preparing therapeutic inflight meals (CTIM).

Examining background information for first-termers by MAJCOM also shows a few minor variations. Personnel in PACAF tend to have experience with fewer types of therapeutic diets. For example, only a third of the PACAF first-termers report they had experience with hypoglycemic diets, while 56 to 75 percent of the other MAJCOMs have experience with that diet. On the other hand, first-termers in AFSC tend to have experience with more types of therapeutic diets, such as gluten restricted, high potassium, potassium restricted, and other special diets. This variety of experience also indicates they have a more diverse job. There are also differences in the equipment used by first-termers in the various MAJCOMs. The most notable equipment items are Ala Carte cash registers and Aladdin food tray systems. The only two MAJCOMs with first-termers reporting they use Ala Carte cash registers are SAC (60 percent of the first-termers using them) and MAC (only 3 percent of the first-termers using them). Aladdin food tray systems are used by more MAJCOMs: PACAF (67 percent), SAC (31 percent), ATC (8 percent), MAC (7 percent), and TAC (4 percent).

COMPARISON TO PREVIOUS SURVEY

To identify general trends or changes in the career ladder over time, results of this survey were compared to results of the last survey, reported in OSR AFPT 90-622-297, dated March 1978. The last survey examined AFSCs 62231, 62251, and 62271 (the former designation). This survey also includes the 9-skill level (under the new AFSC designation, 926X0). Figure 3 compares the career ladder structure found in the 1978 study to that of the current analysis. A comparison of job satisfaction indicators, as mentioned in the JOB SATISFACTION section, shows only a slight increase in the percentage responding positively to many of the job satisfaction indicators. The last occupational survey report mentioned low job satisfaction among first- and second-enlistment personnel as a particular concern. The 1978 recommendation, which may still be appropriate, was that diet therapists should be relieved of some of the more routine tasks of menu production and cleaning and maintaining food service facilities, with a corresponding increase in responsibilities in such areas as therapeutic food preparation and application of diet therapy and clinical nutrition.

TABLE 22

PERCENT TIME SPENT PERFORMING DUTIES BY MAJCOMs FOR FIRST-ENLISTMENT PERSONNEL

DUTIES	USAF (N=12)	AFSC (N=20)	ATC (N=38)	MAC (N=31)	PACAF (N=6)	SAC (N=70)	TAC (N=25)
A ORGANIZING AND PLANNING	1	2	2	**	2	2	2
B DIRECTING AND IMPLEMENTING	1	1	1	1	2	1	1
C INSPECTING AND EVALUATING	1	2	1	1	2	2	1
D TRAINING	**	1	1	1	3	**	**
E PERFORMING ADMINISTRATIVE FUNCTIONS	5	21	8	4	9	6	5
F PERFORMING MENU PRODUCTION	26	13	26	27	21	25	29
G PERFORMING THERAPEUTIC FOOD PREPARATION	13	11	12	12	14	13	12
H PREPARING SERVING LINES AND SERVING FOOD	22	8	17	18	19	18	17
I CLEANING AND MAINTAINING FOOD SERVICE FACILITIES	16	6	20	18	10	17	19
J PREPARING THERAPEUTIC INFLIGHT MEALS (CTIM)	1	1	1	3	3	**	**
K APPLYING DIET THERAPY AND CLINICAL NUTRITION	5	26	7	12	11	9	6
L MAINTAINING STOREROOMS	10	7	5	3	5	6	8
M COOKING UNDER FIELD CONDITIONS	**	**	**	**	**	**	**

* Columns may not equal 100 percent due to rounding

** Denotes less than .5 percent

A comparison of the job structure findings for the 1978 and 1985 surveys shows similar findings, though the 1985 survey job structure analysis identified job groups in greater detail. The greater detail may be due to the larger sample size (499 for the 1985 sample and 360 for the 1978 sample), or possibly to more specialization for some personnel in the career ladder.

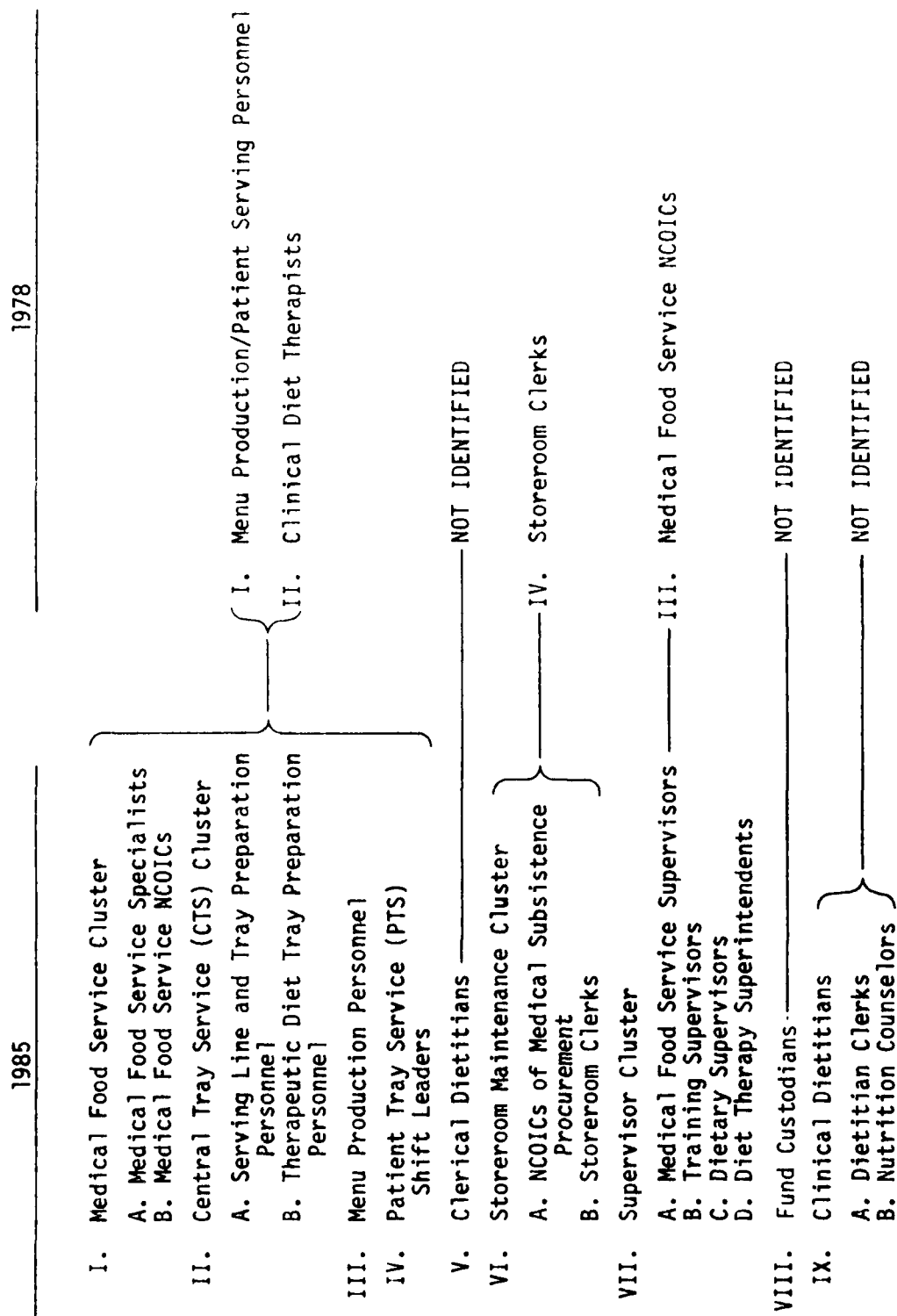
As Figure 3 shows, the main job in the career ladder for both surveys relates to preparing and serving regular and therapeutic food. In the 1978 survey, two clusters described this main job: (I) Menu Production/Patient Serving Personnel, and (II) Clinical Diet Therapists. The first cluster was primarily responsible for preparing and serving meals, and for cleaning and maintaining medical food service facilities; the second performed many of the same tasks, but concentrated more on therapeutic food preparation. In the 1985 survey, analysis identified more specialized groups performing these same jobs: (I) Medical Food Service cluster is the group most similar to the first 1978 cluster; (II) Central Tray Service (CTS) cluster, which specializes more in serving lines and therapeutic tray preparation, performs many of the same tasks and is most similar to the second 1978 cluster; and (III) Menu Production Personnel and (IV) Patient Tray Service (PTS) Shift Leaders are included in the main job described by the first two 1978 clusters.

Two of the most similar job groups are the 1985 Storeroom Maintenance cluster and the 1978 Storeroom Clerks; both of these groups have storeroom maintenance responsibilities. The 1978 Medical Food Service NCOICs seem to be most similar to the Medical Food Service Supervisors within the 1985 Supervisor Cluster; personnel in these groups perform primarily supervisory and administrative duties. Three specialized groups identified in the 1985 survey were not identified in the 1978 survey: Clerical Dietitians, Fund Custodians, and Clinical Dietitians. These job groups are smaller and more specialized than most job groups.

In spite of any small differences that may exist, the overall progression in the career ladder seems much the same. In both surveys, there seem to be no major differences between 3- and 5-skill level diet therapists; at these skill levels, the primary tasks of both groups relate to preparing and serving routine and therapeutic diets, and to maintaining and cleaning food service facilities. Both surveys indicate a clear distinction in the tasks performed at the 7-skill level; personnel at this skill level seem to be primarily responsible for supervisory, management, and administrative functions.

Overall, the comparison to the previous survey shows that this career ladder has remained relatively stable, though there may be slightly more specialization in the career ladder now. The relatively small increase in job satisfaction may be an indication of the specialization; however, job satisfaction for first- and second-enlistment personnel is still of concern, especially for those in more routine jobs, such as those of the Central Tray Service cluster, Menu Production Personnel, and Clerical Dietitians (see SPECIALTY JOBS section). Change in responsibilities to include duties more directly related to application of diet therapy, as well as rotating personnel through some of the more routine duties, may be possible steps toward increasing job satisfaction.

FIGURE 3
CAREER LADDER COMPARISON



SPECIAL CONSIDERATIONS

In addition to task statements designed to collect task performance data, several background questions, such as those indicating job satisfaction, are included in the survey to address issues of concern to career ladder trainers. Issues of concern in this career ladder include information about the specific type of diets for which menus are prepared and the differences between the jobs performed at units assigned dietitians and at units without dietitians. A summary of data regarding these special considerations follows.

One background question in the survey listed diets that may be used in the 926X0 career ladder and asked respondents to indicate which diets they have had experience with in their present assignment. To address this concern, this item was examined by TAFMS grouping (1-48 months, 49-96 months, and 97 or more months). Those diets most personnel have experience with--that is, those indicated by 60 percent or more of all three groups--are listed in Table 23. Of the 55 listed in the survey, 22 were indicated by 60 percent or more of all three groups. Examples of these diets include Bland Diet, Fat Restricted Diet, and Clear Liquid Diet. In addition, 10 other diets were indicated by 30 percent or more of all three groups as diets they have had experience with in their present assignments; these are listed in Table 24. Note that 3 of these diets (Carbohydrate Test Diet, 150 gm and 300 gm; Post Gastrectomy Diet; Protein Restricted Diet) have been used by 60 percent or more of the 2 more experienced groups (49-96 months TAFMS and 97 or more months TAFMS). It seems that the more experienced personnel encounter a wider variety of diets than the first-enlistment personnel, as shown not only by the above example but also by Table 25, which lists additional diets performed by 30 percent or more of the career group (97 or more months TAFMS).

To address the issue of how diet therapy differs at units without an assigned dietitian, two groups were generated based on responses to a background question. Those who answered that a dietitian (AFSC 9216) is assigned to their unit formed one group, and all others formed the second group. Computer listings for each group were then generated, each displaying the tasks performed by members of that group, along with the percentage of members performing that task and the average relative time spent on that task.

A comparison of the data for these two groups shows that differences between the tasks performed occur mainly in tasks performed by personnel without an assigned dietitian. That is, personnel without an assigned dietitian perform tasks that those with an assigned dietitian also perform, but they perform several additional tasks that those with an assigned dietitian do not. Most of these additional tasks are related to actual application of diet therapy and clinical nutrition--as would be expected in units where there is no dietitian to perform those tasks. Examples of some of the task differences are given in Table 26. Note that the few differences that do occur in tasks performed by more personnel with an assigned dietitian than personnel without an assigned dietitian relate to serving lines.

TABLE 23

DIETS USED IN PRESENT ASSIGNMENT BY 60 PERCENT OR MORE
(PERCENT RESPONDING)

DIET	EXPERIENCE GROUPS		
	1-48 MOS TAFMS	49-96 MOS TAFMS	97+ MOS TAFMS
BLAND DIET	95	91	92
CALORIE RESTRICTED DIET	92	89	91
CARBOHYDRATE RESTRICTED, HIGH PROTEIN, SIX MEAL (HYPOGLYCEMIA) DIET	63	66	81
CHILD DIET	90	88	87
CLEAR LIQUID DIET	98	97	95
DENTAL LIQUID DIET	94	91	92
DENTAL SOFT DIET	96	95	95
DIABETIC DIET	96	95	96
FAT CONTROLLED, CHOLESTEROL RESTRICTED DIET	91	92	92
FAT FREE TEST DIET	60	71	70
FAT RESTRICTED DIET	90	90	89
FIBER RESTRICTED DIET	87	87	89
FULL LIQUID DIET	96	95	94
HIGH FIBER DIET	83	84	89
HYPERLIPOPROTEINMIA (HLP) DIET	58	71	83
INFANT DIET	76	83	66
LACTOSE RESTRICTED DIET	60	65	69
MINIMAL FIBER, MINIMAL RESIDUE DIET	81	85	88
SIX-MEAL BLAND DIET	74	82	81
SODIUM RESTRICTED DIET	94	94	95
SOFT DIET	95	97	95
SOFT DIET FOR TONSILLECTOMY AND ADENOIDECTOMY	67	71	73

TABLE 24

DIETS USED IN PRESENT ASSIGNMENT BY 30-59 PERCENT
(PERCENT MEMBERS RESPONDING)

DIET	EXPERIENCE GROUPS		
	1-48 MOS TAFMS	49-96 MOS TAFMS	97+ MOS TAFMS
BARIUM ENEMA PREPARATION DIET	39	48	44
BASIC ELIMINATION DIET	36	45	46
CARBOHYDRATE TEST DIET, 150GM AND 300GM	40	62	69
GLUTEN RESTRICTED DIET	30	40	55
HIGH POTASSIUM DIET	31	39	47
MILK ELIMINATION DIET	45	43	46
POST GASTRECTOMY DIET	54	63	66
POTASSIUM RESTRICTED DIET	41	46	58
PROTEIN RESTRICTED DIET	55	66	76
TUBE FEEDING	43	55	55

TABLE 25

DIETS USED IN PRESENT ASSIGNMENT BY 30 PERCENT OR MORE OF
CAREER GROUP
(PERCENT MEMBERS RESPONDING)

DIET	EXPERIENCE GROUPS	
	49-96 MOS TAFMS	97+ MOS TAFMS
CALCIUM DIET	34	41
CALCIUM TEST DIET	17	34
EGG ELIMINATION DIET	24	32
FAT TEST DIET, 100GM	29	41
GALACTOSE RESTRICTED DIET	24	34
MEDIUM-CHAIN TRIGLYCERIDE DIET	19	33
PURINE RESTRICTED DIET	40	58
VANILMANDELIC ACID (VMA) TEST DIET	50	59

TABLE 26

REPRESENTATIVE TASK DIFFERENCES BETWEEN PERSONNEL WITH AND
WITHOUT ASSIGNED DIETITIAN
(PERCENT MEMBERS PERFORMING)

TASKS	WITH DIETITIAN (N=306)	WITHOUT DIETITIAN (N=180)	DIFFERENCE
H235 SERVE FOOD ON SERVING LINES	66	39	+27
H215 BREAK DOWN SERVING LINES	61	35	+26
I282 CLEAR AND CLEAN SERVING LINES	60	37	+23
.	.	.	.
.	.	.	.
.	.	.	.
K312 COMPLETE AF FORMS 1741 (DIET RECORD)	38	62	-24
K319 OBSERVE PATIENT'S ACCEPTANCE OF FOOD	35	63	-28
K306 ADVISE PATIENTS IN SELECTING FOOD ITEMS FOR THEIR DIETS	35	64	-29
K321 PLAN CALORIE-RESTRICTED OR DIABETIC DIETS USING FOOD EXCHANGE LISTS	33	62	-29
L329 MAINTAIN SECURITY OF STORAGE AREAS	33	62	-29
K315 INTERVIEW PATIENTS TO DETERMINE HABITS OR PROBLEMS	39	73	-34
K316 MAKE WARD ROUNDS OR VISITS	47	83	-36

WRITE-IN COMMENTS

In addition to answering background questions and rating tasks performed, survey respondents may also write in comments or add information at the end of the inventory. These write-in comments often address several different issues, such as additional equipment or tasks, or personal opinions about a subject. It is helpful to consider multiple comments on an issue to identify those of possible importance.

Several respondents mentioned additional diets they have experience with in their present assignment: those mentioned by more than one person include prenatal diets, prenatal calorie-restricted diets, and cardiac diets. Other respondents mentioned additional equipment they use. Equipment most frequently mentioned includes pass-through refrigerators, manual and electric can openers, and calculators or calculating machines.

Several tasks were written in. Those mentioned by more than one respondent include driving 1½ ton trucks for subsistence pick up; several tasks related to the Ala Carte System, such as assign Ala Carte food prices to food items on AF 662 and complete AF Form 812 (ALACS Meal Order Record); a few tasks related to quality assurance; and a few diet consultation tasks. These write-in comments may indicate that some 926X0 personnel are more widely used in these areas than indicated by survey results, and that for future surveys the task inventory should be expanded to include more tasks in these areas. The number of respondents writing in these tasks, however, represent only about 1 or 2 percent of the career ladder. Another area mentioned by eight respondents related to field training; these respondents mentioned they will be involved in a field training exercise.

An area of particular concern to this career ladder relates to job satisfaction. Several respondents mentioned that menial, routine work relating to cooking and preparing food and to sanitizing of facilities takes up most of their job time. They feel their talents and training in diet therapy are being wasted and they can't get the proper training or expansion of knowledge they need to progress in their career ladder. This concern is also mentioned in the JOB SATISFACTION section of this report, based on job satisfaction indicator data. Also, a couple of senior NCOs who rated Training Emphasis booklets wrote in comments expressing a need for more emphasis on training diet therapy and clinical nutrition tasks and less emphasis on the more routine cooking and serving tasks. They expressed dissatisfaction in the ratio of food service training to diet therapy training given by the two resident technical courses. (The Food Services course at Lowry is over twice as long as the Diet Therapy course at Sheppard). The concern expressed through low job satisfaction data, write-in comments, and TE rater comments may be an indication that diet therapists should be utilized in work more directly related to the application of diet therapy and clinical nutrition, with less emphasis on food preparation and facility sanitation, as recommended in the last OSR.

IMPLICATIONS

As explained in the INTRODUCTION to this report, this survey was requested by the School of Health Care Sciences at Sheppard AFB TX for the purpose of identifying any training concerns due to the change to a biomedical career ladder. The clusters and job types identified in the analysis of the data are very similar to those found in the previous survey, although there may possibly be a little more specialization in the career ladder. Still, the main job remains much the same, involving mostly food preparation and serving and facility cleaning and maintenance. The low job satisfaction may be a reflection of the desire within the career ladder to be more involved in actual application of diet therapy and clinical nutrition, and less involved in the more routine work of food preparation and facility sanitation.

An evaluation of the Plan of Instruction for the Food Services Course (3ABR62230/3AQR92630) shows that performance items in the POI are well supported by survey data, indicating these areas of instruction, which deal mainly with food preparation and facility sanitation, are important for 926X0 training. Since knowledge items account for about 150 hours of course time, training specialists may wish to evaluate the relevance of these as well. An evaluation of the POI for the Diet Therapy course (3ABR926X0) shows that it is generally supported by survey data, though some areas may be more appropriate for OJT. Also, some tasks not included in either POI may need to be added due to high performance by first-termers and high training emphasis ratings. The Specialty Training Standard should be reviewed to determine if some items not supported by survey data are justified, and to determine if several tasks performed in the field--particularly tasks related to cleaning and maintaining facilities--should be added.

In general, the 926X0 career ladder seems stable, though low job satisfaction related to the routine nature of many jobs may indicate the need for a shift from these more routine tasks to greater involvement in application of diet therapy and clinical nutrition.

APPENDIX A
JOB GROUP DESCRIPTIONS

TABLE I
MEDICAL FOOD SERVICE CLUSTER
(GRP 72)

Group Size: 254

Percent of Sample: 51%

Average Grade: E-4

Average TAFMS: 67 Months

Average Time in Career Field (TICF): 50 Months

DAFSC: 92630 22%
92650 63%
92670 13%
92690 1%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
F148 MAKE COFFEE, TEA, OR COCOA	99
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	99
F137 COOK EGGS	96
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	96
F168 PREPARE NOURISHMENTS (SNACKS)	94
F176 SAMPLE FOODS BY TASTE AND SMELL	93
F154 PREPARE BROTHS	93
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	93
G210 PREPARE ISOLATION TRAYS	93
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	92
F155 PREPARE CANNED FOOD	92
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	92
G188 PREPARE FOOD FOR DIABETIC DIETS ACCORDING TO GUIDELINES IN AF FORMS 2479 AND 2480 (DIABETIC)	91
F164 PREPARE FRUITS	91
G184 PREPARE FOOD FOR CALORIE-RESTRICTED DIETS ACCORDING TO GUIDELINES IN AF FORMS 2499 AND 2500 (CALORIE RESTRICTED)	91
G183 PREPARE FOOD FOR BLAND DIETS ACCORDING TO GUIDELINES IN AF FORMS 2489 AND 2490 (BLAND)	90
I249 CLEAN FLOORS OR WALLS	90
F149 MAKE GELATIN DESSERTS	89
G190 PREPARE FOOD FOR FAT-RESTRICTED DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	89
F173 PREPARE SANDWICHES	89
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	89
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	88

TABLE IA
MEDICAL FOOD SERVICE SPECIALISTS
(GRP 79)

Group Size: 205

Average Grade: E-4

Average TAFMS: 51 Months

Average Time in Career Field (TICF): 38 Months

DAFSC: 92630 27%
92650 65%
92670 8%
92690 .5%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	100
F148 MAKE COFFEE, TEA, OR COCOA	100
F137 COOK EGGS	97
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	95
F154 PREPARE BROTHS	95
F168 PREPARE NOURISHMENTS (SNACKS)	94
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	94
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	94
F176 SAMPLE FOODS BY TASTE AND SMELL	93
G210 PREPARE ISOLATION TRAYS	93
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	93
G184 PREPARE FOOD FOR CALORIE-RESTRICTED DIETS ACCORDING TO GUIDELINES IN AF FORMS 2499 AND 2500 (CALORIE RESTRICTED)	93
F155 PREPARE CANNED FOOD	93
G188 PREPARE FOOD FOR DIABETIC DIETS ACCORDING TO GUIDELINES IN AF FORMS 2479 AND 2480 (DIABETIC)	92
F164 PREPARE FRUITS	92
I249 CLEAN FLOORS OR WALLS	91
G183 PREPARE FOOD FOR BLAND DIETS ACCORDING TO GUIDELINES IN AF FORMS 2489 AND 2490 (BLAND)	91
G190 PREPARE FOOD FOR FAT-RESTRICTED DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	91
F149 MAKE GELATIN DESSERTS	90
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	90
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	90
F173 PREPARE SANDWICHES	90

TABLE IB
MEDICAL FOOD SERVICE NCOICs
(GRP 122)

Group Size: 49

Average Grade: E-5

Average TAFMS: 133 Months

Average Time in Career Field (TICF): 102 Months

DAFSC: 92630 4%
92650 57%
92670 37%
92690 2%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
F151 MAKE MENU ITEM SUBSTITUTIONS	100
F148 MAKE COFFEE, TEA, OR COCOA	98
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	98
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	96
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	96
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	96
F176 SAMPLE FOODS BY TASTE AND SMELL	94
G180 EVALUATE BULK NOURISHMENT REQUESTS TO DETERMINE APPROPRIATE- NESS OF REQUESTS	94
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	94
F137 COOK EGGS	94
D72 CONDUCT IN-SERVICE TRAINING	94
C65 INSPECT FOOD BEFORE, DURING, AND AFTER PREPARATION	92
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	92
L329 MAINTAIN SECURITY OF STORAGE AREAS	92
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	92
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	92
F145 COOK VEGETABLES	92
A1 ASSIGN PERSONNEL TO INITIAL DUTY POSITIONS	92
F168 PREPARE NOURISHMENTS (SNACKS)	92
F143 COOK POULTRY	92
B45 SUPERVISE PATIENT TRAY SERVICE	90
K315 INTERVIEW PATIENTS TO DETERMINE FOOD HABITS OR PREFERENCES	90
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	90
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	90
A3 CONDUCT IN-SERVICE SANITATION PROGRAMS FOR ASSIGNED PERSONNEL	90

TABLE II
CENTRAL TRAY SERVICE (CTS) CLUSTER
(GRP 44)

Group Size: 45

Percent of Sample: 9%

Average Grade: E-3

Average TAFMS: 27 Months

Average Time in Career Field (TICF): 19 Months

DAFSC: 92630 47%
92650 53%
92670 0%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
I249 CLEAN FLOORS OR WALLS	93
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	91
F148 MAKE COFFEE, TEA, OR COCOA	91
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	91
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	87
I264 CLEAN OR STORE PATIENT FOOD CARTS	87
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	87
H235 SERVE FOOD ON SERVING LINES	84
F168 PREPARE NOURISHMENTS (SNACKS)	84
H221 PERFORM CLEANING OF SERVING LINE AS REQUIRED	82
H215 BREAK DOWN SERVING LINES	80
F137 COOK EGGS	80
G210 PREPARE ISOLATION TRAYS	80
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING REQUIREMENTS	78
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	78
I291 WASH DISHES, POTS, OR PANS	76
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	76
H222 PORTION INDIVIDUAL SERVINGS OF BEVERAGES	76
F164 PREPARE FRUITS	71
I282 CLEAR AND CLEAN SERVING LINES	67
H233 REPLENISH FOODS IN SERVING LINES	67
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	67
I285 DISPOSE OF FOOD WASTES	64
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	64
F169 PREPARE OR MIX BEVERAGES	64
F149 MAKE GELATIN DESSERTS	62

TABLE IIA
SERVING LINE AND TRAY PREPARATION PERSONNEL
(GRP 110)

Group Size: 17

Average Grade: E-3

Average TAFMS: 23 Months

Average Time in Career Field (TICF): 18 Months

DAFSC: 92630 47%
92650 53%
92670 0%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
I249 CLEAN FLOORS OR WALLS	100
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	100
I282 CLEAR AND CLEAN SERVING LINES	100
H221 PERFORM CLEANING OF SERVING LINE AS REQUIRED	100
H235 SERVE FOOD ON SERVING LINES	100
H215 BREAK DOWN SERVING LINES	100
I264 CLEAN OR STORE PATIENT FOOD CARTS	100
F148 MAKE COFFEE, TEA, OR COCOA	100
H222 PORTION INDIVIDUAL SERVINGS OF BEVERAGES	94
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	94
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	94
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	88
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	88
F149 MAKE GELATIN DESSERTS	88
F168 PREPARE NOURISHMENTS (SNACKS)	88
I291 WASH DISHES, POTS, OR PANS	82
G210 PREPARE ISOLATION TRAYS	82
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	76
H233 REPLENISH FOODS IN SERVING LINES	76
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING OUT REQUIREMENTS	76
F176 SAMPLE FOODS BY TASTE AND SMELL	76
H237 SET UP OR REPLENISH SILVERWARE OR TRAY RACKS	76
F137 COOK EGGS	76
H212 ARRANGE OR GARNISH FOODS	71
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	71
F169 PREPARE OR MIX BEVERAGES	71

TABLE IIB
THERAPEUTIC DIET TRAY PREPARATION PERSONNEL
(GRP 84)

Group Size: 14

Average Grade: E-3

Average TAFMS: 26 Months

Average Time in Career Field (TICF): 17 Months

DAFSC: 92630 57%
92650 43%
92670 0%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	100
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	100
F168 PREPARE NOURISHMENTS (SNACKS)	100
I249 CLEAN FLOORS OR WALLS	93
G188 PREPARE FOOD FOR DIABETIC DIETS ACCORDING TO GUIDELINES IN AF FORMS 2479 AND 2480 (DIABETIC)	93
G187 PREPARE FOOD FOR DENTAL SOFT DIETS ACCORDING TO GUIDELINES IN AF FORMS 2483 AND 2484 (DENTAL SOFT-T&A SOFT)	93
G186 PREPARE FOOD FOR DENTAL LIQUID DIETS ACCORDING TO PHYSICIAN'S OR DIETITIAN'S GUIDELINES AND AFR 160-8	93
G210 PREPARE ISOLATION TRAYS	93
I291 WASH DISHES, POTS, OR PANS	86
F148 MAKE COFFEE, TEA, OR COCOA	86
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	86
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	86
H235 SERVE FOOD ON SERVING LINES	86
F137 COOK EGGS	86
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	79
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	79
H216 INITIATE PATIENT TRAY PREPARATION BY SETTING UP TRAYS OR CALLING OUT REQUIREMENTS	79
G207 PREPARE FOOD FOR SURGICAL ROUTINE DIETS, SUCH AS GASTRECTOMY, LIQUID, OR SOFT DIETS	79
G206 PREPARE FOOD FOR SODIUM-RESTRICTED DIETS ACCORDING TO GUIDELINES IN AF FORMS 2478 AND 2485 (SODIUM RESTRICTED)	79
G184 PREPARE FOOD FOR CALORIE-RESTRICTED DIETS ACCORDING TO GUIDELINES IN AF FORMS 2499 AND 2500 (CALORIE RESTRICTED)	79

TABLE III
MENU PRODUCTION PERSONNEL
(GRP 108)

Group Size: 8

Percent of Sample: 2%

Average Grade: E-4

Average TAFMS: 89 Months

Average Time in Career Field (TICF): 67 Months

DAFSC: 92630 25%
92650 63%
92670 13%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
F140 COOK MEAT	100
F177 SEASON OR FLAVOR FOODS	100
F138 COOK FOOD USING PROGRESSIVE COOKING TECHNIQUES	100
F143 COOK POULTRY	100
F135 CLEAN FOOD PRIOR TO COOKING OR SERVING	100
F159 PREPARE DEHYDRATED FOODS (E.G., INSTANT MASHED POTATOES) FOR COOKING OR SERVING	100
F142 COOK PASTA, SUCH AS NOODLES OR SPAGHETTI	100
F166 PREPARE GRAVIES	100
F176 SAMPLE FOODS BY TASTE AND SMELL	100
F155 PREPARE CANNED FOOD	100
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	88
F147 DETERMINE LEFTOVER FOOD UTILIZATION	88
F145 COOK VEGETABLES	88
F133 ADJUST RECIPES FOR LARGE OR SMALL QUANTITY COOKING	88
F179 WEIGH OR MEASURE INGREDIENTS	88
F144 COOK SEAFOOD	88
F132 ADD GRAVIES OR SAUCES TO FOODS	88
I254 CLEAN KETTLES	88
F151 MAKE MENU ITEM SUBSTITUTIONS	88
F139 COOK HOT CEREALS, SUCH AS OATMEAL	88
F163 PREPARE FROZEN FOODS FOR COOKING OR SERVING	75
H233 REPLENISH FOODS IN SERVING LINES	75
I283 CLEAR AND CLEAN WORK TABLES AND AREAS	75
H235 SERVE FOOD ON SERVING LINES	75
F137 COOK EGGS	75
F153 PREPARE BATTERS (I.E., PANCAKE, CAKE)	75
H215 BREAK DOWN SERVING LINES	75

TABLE IV
PATIENT TRAY SERVICE (PTS) SHIFT LEADERS
(GRP 56)

Group Size: 6

Percent of Sample: 1%

Average Grade: E-6

Average TAFMS: 147 Months

Average Time in Career Field (TICF): 123 Months

DAFSC: 92630 0%
92650 33%
92670 67%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	100
B45 SUPERVISE PATIENT TRAY SERVICE	100
H233 REPLENISH FOODS IN SERVING LINES	100
D93 ROTATE JOB ASSIGNMENTS FOR TRAINING PURPOSES	100
B37 SUPERVISE APPRENTICE DIET THERAPY SPECIALISTS (AFSC 92630)	100
E117 PREPARE AND MAINTAIN AF FORMS 2577 (MEDICAL FOOD SERVICE DAILY WORK ASSIGNMENT)	100
B38 SUPERVISE CIVILIAN PERSONNEL	100
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	100
H235 SERVE FOOD ON SERVING LINES	100
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	100
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	100
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	100
H217 INSPECT COMPLETED PATIENT TRAYS	83
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	83
F176 SAMPLE FOODS BY TASTE AND SMELL	83
J297 PLACE AND STORE INFLIGHT MEALS IN REFRIGERATOR	83
H236 SERVE FOOD USING ISOLATION SERVING PROCEDURES	83
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	83
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	83
H237 SET UP OR REPLENISH SILVERWARE OR TRAY RACKS	83
H219 LOAD PATIENT TRAYS ONTO FOOD CARTS	83
A5 DETERMINE WORK PRIORITIES	83
H232 PREPARE TOASTERS FOR USE	83
I282 CLEAR AND CLEAN SERVING LINES	83

TABLE V
CLERICAL DIETITIANS
(GRP 64)

Group Size: 5

Percent of Sample: 1%

Average Grade: E-3

Average TAFMS: 33 Months

Average Time in Career Field (TICF): 15 Months

DAFSC: 92630 100%
92650 0%
92670 0%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
E97 COLLECT OR MAINTAIN AF FORMS 1094 (DIET ORDER)	100
E130 RECORD PATIENT TRAY SERVICE AND THERAPEUTIC DIET WORKLOAD DATA ON AF FORMS 2573 (DIET CENSUS)	100
K316 MAKE WARD ROUNDS OR VISITS	100
F136 COLLECT WARD DIET ORDER CHANGES AND PROVIDE THEM TO FOOD PRODUCTION PERSONNEL	100
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	100
E131 TALLY PATIENT MENUS	80
K312 COMPLETE AF FORMS 1741 (DIET RECORD)	80
H213 ARRANGE PATIENT TRAYS TO ENHANCE APPEARANCE	80
F132 ADD GRAVIES OR SAUCES TO FOODS	80
H223 PORTION MEATS, POULTRY, OR SEAFOODS FOR INDIVIDUAL SERVINGS	80
E110 MAINTAIN, PREPARE, OR CONTROL AF FORMS 1339 (DINING HALL SIGNATURE RECORD)	80
C65 INSPECT FOOD BEFORE, DURING, AND AFTER PREPARATION	80
H212 ARRANGE OR GARNISH FOODS	80
K315 INTERVIEW PATIENTS OF DETERMINE FOOD HABITS OR PREFERENCES	80
F151 MAKE MENU ITEM SUBSTITUTIONS	80
F176 SAMPLE FOODS BY TASTE AND SMELL	80
H240 WRAP OR COVER INDIVIDUAL SERVINGS OR NOURISHMENTS ON PATIENT TRAYS	80
F148 MAKE COFFEE, TEA, OR COCOA	80
H236 SERVE FOOD USING ISOLATION SERVING PROCEDURES	80
G210 PREPARE ISOLATION TRAYS	80
F154 PREPARE BROTHS	80
F168 PREPARE NOURISHMENTS (SNACKS)	80
F141 COOK PANCAKES, FRENCH TOAST, OR WAFFLES	80
H238 TRANSPORT FOOD CARTS TO SERVING LINE OR WARDS	60

TABLE VI
STOREROOM MAINTENANCE CLUSTER
(GRP 50)

Group Size: 32

Percent of Sample: 6%

Average Grade: E-4

Average TAFMS: 87 Months

Average Time in Career Field (TICF): 68 Months

DAFSC: 92630 6%
92650 78%
92670 16%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
L331 ORDER FOOD ITEMS FROM COMMISSARY	100
L332 ORDER FOOD ITEMS FROM TROOP ISSUE	100
L346 ROTATE STOCK USING FIRST IN - FIRST OUT (FIFO) PRINCIPLES	100
L328 ISSUE FOOD ITEMS	97
L335 POST AF FORMS 287 (SUBSISTENCE REQUEST)	94
L329 MAINTAIN SECURITY OF STORAGE AREAS	94
L342 RECEIVE FOOD ITEMS FROM VENDORS OTHER THAN COMMISSARY	94
L337 PREPARE FOR AND PERFORM QUARTERLY INVENTORIES OF SUBSISTENCE	94
L347 STORE ITEMS ACCORDING TO EIGHT FOOD GROUPS LISTED IN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	94
L341 RECEIVE FOOD ITEMS FROM COMMISSARY	91
E119 PREPARE AND MAINTAIN AF FORMS 543 (FOOD ISSUE RECORD)	91
L348 VERIFY SUBSISTENCE REQUEST FOR QUALITY, QUANTITY, OR CONDITION OF ITEMS UPON RECEIPT	91
L345 RETURN EXCESS SUBSISTENCE TO STOCK	91
L343 RECEIVE, INSPECT, AND SIGN DIRECT-DELIVERY VENDOR BILLS	88
L330 MONITOR PROPER TEMPERATURE OF STORAGE AREAS	88
L336 POST OR MAINTAIN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	81
L334 PERFORM SUBSISTENCE ACCOUNTING PROCEDURES	81
A10 ESTABLISH APPROPRIATE STOCK CONTROLS OR RESERVE LEVELS OF FOOD OR SUPPLIES	78
B42 SUPERVISE HANDLING, STORAGE, OR REFRIGERATION OF FOOD ITEMS	75
L327 DETERMINE SUBSISTENCE PURCHASE REQUIREMENTS IN ACCORDANCE WITH LOCAL DIRECTIVES	72
L326 DATE-STAMP FOOD ITEMS IN STORAGE AREAS	63
L333 PERFORM OPERATOR MAINTENANCE ON STOREROOM EQUIPMENT	63
I279 CLEAN WALK-IN REFRIGERATORS OR FREEZERS	59
L338 PREPARE OR MAINTAIN AF FORMS 129 (TALLY IN-OUT)	59

TABLE VIA
NCOICs OF MEDICAL SUBSISTENCE PROCUREMENT
(GRP 90)

Group Size: 10

Average Grade: E-5

Average TAFMS: 100 Months

Average Time in Career Field (TICF): 66 Months

DAFSC: 92630 0%
92650 80%
92670 20%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
L334 PERFORM SUBSISTENCE ACCOUNTING PROCEDURES	100
L331 ORDER FOOD ITEMS FROM COMMISSARY	100
L332 ORDER FOOD ITEMS FROM TROOP ISSUE	100
L328 ISSUE FOOD ITEMS	100
L337 PREPARE FOR AND PERFORM QUARTERLY INVENTORIES OF SUBSISTENCE	100
L335 POST AF FORMS 287 (SUBSISTENCE REQUEST)	100
L336 POST OR MAINTAIN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	100
L346 ROTATE STOCK USING FIRST IN - FIRST OUT (FIFO) PRINCIPLES	100
A10 ESTABLISH APPROPRIATE STOCK CONTROLS OR RESERVE LEVELS OF OF FOOD OR SUPPLIES	100
L347 STORE ITEMS ACCORDING TO EIGHT FOOD GROUPS LISTED IN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	100
E119 PREPARE AND MAINTAIN AF FORMS 543 (FOOD ISSUE RECORD)	100
B42 SUPERVISE HANDLING, STORAGE, OR REFRIGERATION OF FOOD ITEMS	100
C65 INSPECT FOOD BEFORE, DURING, AND AFTER PREPARATION	100
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	100
L348 VERIFY SUBSISTENCE REQUEST FOR QUALITY, QUANTITY, OR CONDITION OF ITEMS UPON RECEIPT	90
L329 MAINTAIN SECURITY OF STORAGE AREAS	90
L327 DETERMINE SUBSISTENCE PURCHASE REQUIREMENTS IN ACCORDANCE WITH LOCAL DIRECTIVES	90
L330 MONITOR PROPER TEMPERATURE OF STORAGE AREAS	90
L341 RECEIVE FOOD ITEMS FROM COMMISSARY	90
L342 RECEIVE FOOD ITEMS FROM VENDORS OTHER THAN COMMISSARY	90
L343 RECEIVE, INSPECT, AND SIGN DIRECT-DELIVERY VENDOR BILLS	90
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	90
L345 RETURN EXCESS SUBSISTENCE TO STOCK	90

TABLE VIB
STOREROOM CLERKS
(GRP 98)

Group Size: 21

Average Grade: E-4

Average TAFMS: 83 Months

Average Time in Career Field (TICF): 70 Months

DAFSC: 92630 10%
92650 76%
92670 14%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
L346 ROTATE STOCK USING FIRST IN - FIRST OUT (FIFO PRINCIPLES)	100
L331 ORDER FOOD ITEMS FROM COMMISSARY	100
L332 ORDER FOOD ITEMS FROM TROOP ISSUE	100
L328 ISSUE FOOD ITEMS	95
L329 MAINTAIN SECURITY OF STORAGE AREAS	95
L342 RECEIVE FOOD ITEMS FROM VENDORS OTHER THAN COMMISSARY	95
L348 VERIFY SUBSISTENCE REQUEST FOR QUALITY, QUANTITY, OR CONDITION OF ITEMS UPON RECEIPT	95
L345 RETURN EXCESS SUBSISTENCE TO STOCK	95
L341 RECEIVE FOOD ITEMS FROM COMMISSARY	90
L335 POST AF FORMS 287 (SUBSISTENCE REQUEST)	90
L343 RECEIVE, INSPECT, AND SIGN DIRECT-DELIVERY VENDOR BILLS	90
L347 STORE ITEMS ACCORDING TO EIGHT FOOD GROUPS LISTED IN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	90
L337 PREPARE FOR AND PERFORM QUARTERLY INVENTORIES OF SUBSISTENCE	90
L330 MONITOR PROPER TEMPERATURE OF STORAGE AREAS	90
E119 PREPARE AND MAINTAIN AF FORMS 543 (FOOD STORAGE RECORD)	86
L334 PERFORM SUBSISTENCE ACCOUNTING PROCEDURES	76
L326 DATE-STAMP FOOD ITEMS IN STORAGE AREAS	76
L336 POST OR MAINTAIN AF FORMS 1742 (FOOD PURCHASE/USE RECORD)	71
A10 ESTABLISH APPROPRIATE STOCK CONTROLS OR RESERVE LEVELS OF FOOD OR SUPPLIES	71
L327 DETERMINE SUBSISTENCE PURCHASE REQUIREMENTS IN ACCORDANCE WITH LOCAL DIRECTIVES	67
L333 PERFORM OPERATOR MAINTENANCE ON STOREROOM EQUIPMENT	67
I279 CLEAN WALK-IN REFRIGERATORS OR FREEZERS	67
B42 SUPERVISE HANDLING, STORAGE, OR REFRIGERATION OF FOOD ITEMS	62

TABLE VII
SUPERVISOR CLUSTER
(GRP 33)

Group Size: 67

Percent of Sample: 13%

Average Grade: E-6

Average TAFMS: 172 Months

Average Time in Career Field (TICF): 122 Months

DAFSC: 92630 0%
92650 19%
92670 81%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
A11 ESTABLISH OR DEVELOP OPERATING INSTRUCTIONS (OI), POLICY LETTERS, OR SELF-INSPECTION TASK LISTS	94
D72 CONDUCT IN-SERVICE TRAINING	94
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	94
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	90
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	90
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	88
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	87
A5 DETERMINE WORK PRIORITIES	87
C54 EVALUATE OR RECOMMEND INDIVIDUALS FOR PROMOTION, UPGRADING, DEMOTION, OR DOWNGRADING	87
A22 SCHEDULE LEAVES OR PASSES	87
D73 CONDUCT ON-THE-JOB TRAINING	85
A21 PLAN WORK SCHEDULES	85
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	85
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	84
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	84
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	84
A1 ASSIGN PERSONNEL TO INITIAL DUTY POSITIONS	84
B46 WRITE CORRESPONDENCE	82
D87 PLAN OR SCHEDULE IN-SERVICE TRAINING PROGRAMS	82
A2 ASSIGN SPONSORS FOR NEWLY ASSIGNED PERSONNEL	82
C50 EVALUATE COMPLIANCE WITH WORK STANDARDS	81
A12 ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	79
A9 DEVELOP WORK METHODS OR PROCEDURES	79

TABLE VIIA
MEDICAL FOOD SERVICE SUPERVISORS
(GRP 74)

Group Size: 52

Average Grade: E-6

Average TAFMS: 176 Months

Average Time in Career Field (TICF): 126 Months

DAFSC: 92630 0%
92650 19%
92670 81%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
A11 ESTABLISH OR DEVELOP OPERATING INSTRUCTIONS (OI), POLICY LETTERS, OR SELF-INSPECTION TASK LISTS	98
D72 CONDUCT IN-SERVICE TRAINING	98
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	98
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	94
B46 WRITE CORRESPONDENCE	90
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	90
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	90
A5 DETERMINE WORK PRIORITIES	90
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	90
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	90
D87 PLAN OR SCHEDULE IN-SERVICE TRAINING PROGRAMS	90
A9 DEVELOP WORK METHODS OR PROCEDURES	88
C54 EVALUATE OR RECOMMEND INDIVIDUALS FOR PROMOTION, UPGRADING, DEMOTION, OR DOWNGRADING	88
A21 PLAN WORK SCHEDULES	88
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	88
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	87
B25 DEVELOP AND IMPLEMENT MEDICAL FOOD SERVICE PLANS FOR DISASTER SITUATIONS	87
A22 SCHEDULE LEAVES OR PASSES	87
A1 ASSIGN PERSONNEL TO INITIAL DUTY POSITIONS	87
A2 ASSIGN SPONSORS FOR NEWLY ASSIGNED PERSONNEL	87
E99 COMPLETE SF FORMS 513 (MEDICAL RECORD-CONSULTATION SHEET)	85

TABLE VIIB
TRAINING SUPERVISORS
(GRP 71)

Group Size: 5

Average Grade: E-6

Average TAFMS: 191 Months

Average Time in Career Field (TICF): 126 Months

DAFSC: 92630 0%
92650 20%
92670 80%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
B24 COUNSEL OR DOCUMENT COUNSELING OR SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	100
D76 COUNSEL STUDENTS OR SUBORDINATES ON TRAINING PROGRESS	100
D85 MAKE OR RECOMMEND CHANGES IN TRAINING PROGRAMS	100
A12 ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	100
C54 EVALUATE OR RECOMMEND INDIVIDUALS FOR PROMOTION, UPGRADING, DEMOTION, OR DOWNGRADING	100
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	100
D92 RECOMMEND INDIVIDUALS FOR TRAINING	100
A11 ESTABLISH OR DEVELOP OPERATING INSTRUCTIONS (OI), POLICY LETTERS, OR SELF-INSPECTION TASK LISTS	100
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	80
B23 CONDUCT STAFF MEETINGS	80
D90 PREPARE OR MAINTAIN AF FORMS 1098 (SPECIAL TASK CERTIFICATION AND RECURRING TRAINING)	80
D88 PLAN OR SCHEDULE ON-THE-JOB TRAINING (OJT)	80
C60 EVALUATE WORK STANDARDS	80
B46 WRITE CORRESPONDENCE	80
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	80
C59 EVALUATE WORK SCHEDULES	80
D84 EVALUATE TRAINING PROGRESS OF INDIVIDUALS	80
D82 ESTABLISH TRAINING REQUIREMENTS	80
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	80
A21 PLAN WORK SCHEDULES	80
D93 ROTATE JOB ASSIGNMENTS FOR TRAINING PURPOSES	80
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	80

TABLE VIIC
DIETARY SUPERVISORS
(GRP 62)

Group Size: 5

Average Grade: E-5

Average TAFMS: 117 Months

Average Time in Career Field (TICF): 95 Months

DAFSC: 92630 0%
92650 20%
92670 80%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
K315 INTERVIEW PATIENTS TO DETERMINE FOOD HABITS OR PREFERENCES	100
K316 MAKE WARD ROUNDS OR VISITS	100
K313 CONDUCT CLASSES IN NUTRITION FOR PERSONNEL OTHER THAN DIET THERAPY PERSONNEL	100
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	100
B45 SUPERVISE PATIENT TRAY SERVICE	100
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	100
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	100
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	100
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	100
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	100
A5 DETERMINE WORK PRIORITIES	100
E99 COMPLETE SF FORMS 513 (MEDICAL RECORD-CONSULTATION SHEET)	80
E118 PREPARE AND MAINTAIN AF FORMS 2578 (MEDICAL FOOD SERVICE WORK SCHEDULE)	80
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	80
D72 CONDUCT IN-SERVICE TRAINING	80
C50 EVALUATE COMPLIANCE WITH WORK STANDARDS	80
B37 SUPERVISE APPRENTICE DIET THERAPY SPECIALISTS (AFSC 92630)	80
A20 PLAN WORK ASSIGNMENTS	80
A11 ESTABLISH OR DEVELOP OPERATING INSTRUCTIONS (OI), POLICY LETTERS, OR SELF-INSPECTION TASK LISTS	80
K317 MODIFY OR REVIEW DIETS OR MEAL PATTERNS FOR INDIVIDUAL PATIENTS	80
A21 PLAN WORK SCHEDULES	80
A22 SCHEDULE LEAVES OR PASSES	80

TABLE VIID
DIET THERAPY SUPERINTENDENTS
(GRP 40)

Group Size: 5

Average Grade: E-6

Average TAFMS: 165 Months

Average Time in Career Field (TICF): 112 Months

DAFSC: 92630 0%
92650 20%
92670 80%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
D73 CONDUCT ON-THE-JOB TRAINING (OJT)	100
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	100
D84 EVALUATE TRAINING PROGRESS OF INDIVIDUALS	100
A22 SCHEDULE LEAVES OR PASSES	100
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	100
B24 COUNSEL OR DOCUMENT COUNSELING OF SUBORDINATES ON PERSONAL OR WORK-RELATED PROBLEMS	100
C54 EVALUATE OR RECOMMEND INDIVIDUALS FOR PROMOTION, UPGRADING, DEMOTION, OR DOWNGRADING	100
B41 SUPERVISE FOOD SERVICE PERSONNEL (AFS 622X0)	80
D91 PREPARE OR MAINTAIN AF FORMS 623 OR 623A (ON-THE-JOB TRAINING RECORD)	80
B34 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	80
D72 CONDUCT IN-SERVICE TRAINING	80
C62 INDORSE AIRMAN PERFORMANCE REPORTS (APR)	80
A15 PLAN FOR PROCUREMENT OF EQUIPMENT OR SUPPLIES	80
B35 INTERVIEW OR SELECT CIVILIAN PERSONNEL FOR POSITIONS	80
A5 DETERMINE WORK PRIORITIES	60
B38 SUPERVISE CIVILIAN PERSONNEL	60
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	60
C67 INVENTORY EQUIPMENT OR SUPPLY ACCOUNTS	60
E115 PREPARE AF FORMS 601 (EQUIPMENT ACTION REQUEST)	60
D93 ROTATE JOB ASSIGNMENTS FOR TRAINING PURPOSES	60
A21 PLAN WORK SCHEDULES	60
C59 EVALUATE WORK SCHEDULES	60
A9 DEVELOP WORK METHODS OR PROCEDURES	60
C50 EVALUATE COMPLIANCE WITH WORK STANDARDS	60

TABLE VIII
FUND CUSTODIANS
(GRP 43)

Group Size: 5

Percent of Sample: 1%

Average Grade: E-5

Average TAFMS: 111 Months

Average Time in Career Field (TICF): 89 Months

DAFSC: 92630 0%
92650 80%
92670 20%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
B45 SUPERVISE PATIENT TRAY SERVICE	100
E114 PREPARE AF FORMS 2570 (MEDICAL FOOD SERVICE CASH AND FORMS RECEIPT)	100
B39 SUPERVISE DIET THERAPY SPECIALISTS (AFSC 92650)	100
B41 SUPERVISE FOOD SERVICE PERSONNEL (AFS 622X0)	100
F147 DETERMINE LEFTOVER FOOD UTILIZATION	100
F113 PERFORM MEAL COUNT DUTIES (CASHIER DUTIES)	100
B38 SUPERVISE CIVILIAN PERSONNEL	100
C65 INSPECT FOOD BEFORE, DURING, AND AFTER PREPARATION	100
E107 MAINTAIN CHANGE FUNDS	80
C66 INSPECT PERSONNEL FOR HYGIENE, GROOMING, OR MILITARY STANDARDS	80
C64 INSPECT FACILITIES AND EQUIPMENT FOR SANITATION	80
E98 COMPLETE AF FORMS 1087 (CASH MEAL LOG)	80
C68 PREPARE AIRMAN PERFORMANCE REPORTS (APR)	80
D72 CONDUCT IN-SERVICE TRAINING	80
B37 SUPERVISE APPRENTICE DIET THERAPY SPECIALISTS (AFSC 92630)	60
E110 MAINTAIN, PREPARE, OR CONTROL AF FORMS 1339 (DINING HALL SIGNATURE RECORD)	60
H239 VERIFY FOOD OR BEVERAGE SERVING TEMPERATURES	60
E129 RECEIVE OR RECONCILE CASH COLLECTIONS	60
F176 SAMPLE FOODS BY TASTE AND SMELL	60
B42 SUPERVISE HANDLING, STORAGE, OR REFRIGERATION OF FOOD ITEMS	60
F146 COVER, DATE, AND STORE LEFTOVER FOOD ITEMS	60
A5 DETERMINE WORK PRIORITIES	60
K316 MAKE WARD ROUNDS OR VISITS	60
F138 COOK FOOD USING PROGRESSIVE COOKING TECHNIQUES	60

TABLE IX
CLINICAL DIETITIANS
(GRP 10)

Group Size: 28

Percent of Sample: 6%

Average Grade: E-3

Average TAFMS: 46 Months

Average Time in Career Field (TICF): 32 Months

DAFSC: 92630 43%
92650 50%
92670 7%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
K305 ADAPT DIETARY ALLOWANCES TO PATIENT'S MENU USING AF FORMS 1741 (DIET RECORD)	82
K324 WRITE DIETS USING DIETARY KARDEX FILES	75
K316 MAKE WARD ROUNDS OR VISITS	75
K315 INTERVIEW PATIENTS TO DETERMINE FOOD HABITS OR PREFERENCES	75
K312 COMPLETE AF FORMS 1741 (DIET RECORD)	71
E97 COLLECT OR MAINTAIN AF FORMS 1094 (DIET ORDER)	68
E130 RECORD PATIENT TRAY SERVICE AND THERAPEUTIC DIET WORKLOAD DATA ON AF FORMS 2573 (DIET CENSUS)	68
K306 ADVISE PATIENTS IN SELECTING FOOD ITEMS FOR THEIR DIETS	64
K317 MODIFY OR REVIEW DIETS OR MEAL PATTERNS FOR INDIVIDUAL PATIENTS	61
K321 PLAN CALORIE-RESTRICTED OR DIABETIC DIETS USING FOOD EXCHANGE LISTS	61
E131 TALLY PATIENT MENUS	57
G180 EVALUATE BULK NOURISHMENT REQUESTS TO DETERMINE APPROPRIATE- NESS OF REQUESTS	57
G181 PREPARE AND MAINTAIN AF FORMS 2579 (NOURISHMENT)	54
K319 OBSERVE PATIENTS' ACCEPTANCE OF FOOD	43
K323 PREPARE OR MAINTAIN AF FORMS 2576 (CLINICAL DIETETICS PATIENT VISIT)	43
K322 PREPARE OR AID IN PREPARATION OF DIET HANDOUT MATERIALS AND PRESCRIPTIONS	43
K314 CONSULT WITH PHYSICIANS OR NURSES ABOUT DIET MODIFICATIONS AND PRESCRIPTIONS	43
H217 INSPECT COMPLETED PATIENT TRAYS	39
K310 CALCULATE REQUIREMENTS FOR LOWERING BODY WEIGHT	39
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	39
G211 SELECT SUBSTITUTE FOODS HAVING EQUIVALENT NUTRITIVE VALUES	36

TABLE IXA
DIETITIAN CLERKS
(GRP 96)

Group Size: 9

Average Grade: E-3

Average TAFMS: 27 Months

Average Time in Career Field (TICF): 18 Months

DAFSC: 92630 56%
92650 44%
92670 0%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
K324 WRITE DIETS USING KARDEX FILES	100
K316 MAKE WARD ROUNDS OR VISITS	100
G180 EVALUATE BULK NOURISHMENT REQUESTS TO DETERMINE APPROPRIATE- NESS OF REQUESTS	100
K315 INTERVIEW PATIENTS TO DETERMINE FOOD HABITS OR PREFERENCES	89
G181 PREPARE AND MAINTAIN AF FORMS 2579 (NOURISHMENT)	89
K317 MODIFY OR REVIEW DIETS OR MEAL PATTERNS FOR INDIVIDUAL PATIENTS	78
K305 ADAPT DIETARY ALLOWANCES TO PATIENT'S MENU USING AF FORMS 1741 (DIET RECORD)	78
K306 ADVISE PATIENTS IN SELECTING FOOD ITEMS FOR THEIR DIETS	67
G211 SELECT SUBSTITUTE FOODS HAVING EQUIVALENT NUTRITIVE VALUES	67
E130 RECORD PATIENT TRAY SERVICE AND THERAPEUTIC DIET WORKLOAD DATA ON AF FORMS 2573 (DIET RECORD)	67
E131 TALLY PATIENT MENUS	67
K321 PLAN CALORIE-RESTRICTED OR DIABETIC DIETS USING FOOD EXCHANGE LISTS	56
K312 COMPLETE AF FORMS 1741 (DIET RECORD)	56
E97 COLLECT OR MAINTAIN AF FORMS 1094 (DIET RECORD)	56
H217 INSPECT COMPLETED PATIENT TRAYS	56
F136 COLLECT WARD DIET ORDER CHANGES AND PROVIDE THEM TO FOOD PRODUCTION PERSONNEL	44
K319 OBSERVE PATIENTS' ACCEPTANCE OF FOOD	33
K322 PREPARE OR AID IN PREPARATION OF DIET HANDOUT MATERIALS	33
J304 PRESENT CTIM TO AEROVAC FOR TRANSPORT TO AIRCRAFT	22
J300 PREPARE MAC FORMS 450 (COOKED THERAPEUTIC INFLIGHT MEAL (CTIM) IDENTIFICATION) FOR AEROMEDICAL EVACUATION FLIGHTS	22

TABLE IXB
NUTRITION COUNSELORS
(GRP 63)

Group Size: 10

Average Grade: E-4

Average TAFMS: 82 Months

Average Time in Career Field (TICF): 57 Months

DAFSC: 92630 10%
92650 70%
92670 20%
92690 0%

Task Listing in descending order of percent members performing:

TASKS	PERCENT MEMBERS PERFORMING
K316 MAKE WARD ROUNDS OR VISITS	100
K321 PLAN CALORIE-RESTRICTED OR DIABETIC DIETS USING FOOD EXCHANGE LISTS	100
K315 INTERVIEW PATIENTS TO DETERMINE FOOD HABITS OR PREFERENCES	100
K305 ADAPT DIETARY ALLOWANCES TO PATIENT'S MENU USING AF FORMS 1741 (DIET RECORD)	100
K312 COMPLETE AF FORMS 1741 (DIET RECORD)	100
K306 ADVISE PATIENTS IN SELECTING FOOD ITEMS FOR THEIR DIETS	100
K314 CONSULT WITH PHYSICIANS OR NURSES ABOUT DIET MODIFICATIONS AND PRESCRIPTIONS	100
K317 MODIFY OR REVIEW DIETS OR MEAL PATTERNS FOR INDIVIDUAL PATIENTS	90
K324 WRITE DIETS USING DIETARY KARDEX FILES	90
K323 PREPARE OR MAINTAIN AF FORMS 2576 (CLINICAL DIETETICS PATIENT VISIT)	90
K310 CALCULATE REQUIREMENTS FOR LOWERING BODY WEIGHT	90
K311 CALCULATE REQUIREMENTS FOR MAINTAINING BODY WEIGHT	90
K313 CONDUCT CLASSES IN NUTRITION FOR PERSONNEL OTHER THAN DIET THERAPY PERSONNEL	90
C47 CONDUCT IN-PATIENT CUSTOMER SATISFACTION SURVEYS	90
K322 PREPARE OR AID IN PREPARATION OF DIET HANDOUT MATERIALS	80
K309 CALCULATE REQUIREMENTS FOR INCREASING BODY WEIGHT	80
E99 COMPLETE SF FORMS 513 (MEDICAL RECORD-CONSULTATION SHEET)	80
E97 COLLECT OR MAINTAIN AF FORMS 1094 (DIET ORDER)	70
K318 MONITOR PATIENT DIETS ON AN OUTPATIENT BASIS	70
K319 OBSERVE PATIENTS' ACCEPTANCE OF FOOD	70
K307 CALCULATE OR APPLY CARBOHYDRATE REPLACEMENT FOR PATIENTS ON DIABETIC DIETS	60

END

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4-56

DTIC